STATE REVIEW FRAMEWORK

Indiana

Clean Water Act, Clean Air Act, and Resource Conservation and Recovery Act Implementation in Federal Fiscal Year 2011

> U.S. Environmental Protection Agency Region 5, Chicago

> > Final Report May 17, 2013

SRF Executive Summary

Introduction

State Review Framework (SRF) oversight reviews of the Indiana Department of Environmental Management (IDEM) were conducted August through September 2012 by EPA Region 5 enforcement staff.

The Clean Water Act National Pollutant Discharge Elimination System (CWA-NPDES), Clean Air Act (CAA) Stationary Source and Resource Conservation and Recovery Act (RCRA) Subtitle C programs were reviewed.

SRF findings are based on file metrics derived from file reviews, data metrics, and conversations with program staff.

Priority Issues to Address

The following are the top priority issues affecting the state's program performance:

- CWA The Region found that IDEM is not identifying or entering Single Event Violations (SEVs), and is not accurately identifying them as Significant Non Compliance (SNC) or non-SNC.
- CAA EPA's review indicated instances where although the activities were accurately documented in the file, the compliance status was not reflective of IDEM's determinations in the Air Facility System (AFS), which is a minimum data requirement.

Major SRF CWA-NPDES Program Findings

- The Region found that IDEM is not identifying or entering Single Event Violations (SEVs), and is not accurately identifying them as Significant Non Compliance (SNC) or non-SNC. Single Event Violations are used to capture any permit violations that are not automatically detected by ICIS. Such violations are often found during compliance monitor activities, but may also arise in other ways, such as failure to submit a timely permit application. While IDEM is addressing SNC and returning facilities to compliance, those actions are on occasion not completed in a timely manner. The Region recommends that IDEM develop a plan to address these issues and a formal policy statement, in order to accommodate any resource issues and meet national policy requirements.
- Minimum data requirements (MDRs) related to the general permit universe are not being properly reported to ICIS. IDEM has reported the majority of its general permits as individual permits. This diminishes EPA's ability to utilize SRF to provide proper oversight of IDEM's compliance monitoring and enforcement program. The Region believes that IDEM should resolve this issue by correcting

- ICIS to properly reflect its general permits and the inspections and enforcement actions that IDEM is carrying out.
- The data metric analysis and file review found that IDEM is not linking violations to enforcement actions. Establishing this linkage is a minimum data requirement. As a result, violations appear to the public and EPA to be not addressed and not resolved because ICIS cannot determine that the violations have been resolved.

Major SRF CAA Stationary Source Program Findings

- Compliance Monitoring Reports (CMRs) were well documented, written and inclusive.
 The Region recommends IDEM provide more detail on the CMR whether an inspection
 was a FCE or PCE. IDEM's CMR form listed objectives that were not clear as to the
 type of inspection that was conducted (i.e., CMS vs. Commitment and FCE vs. PCE).
 IDEM should provide more detail on CMRs regarding the enforcement history of the
 facility.
- The Briefing Memos and Enforcement Action Timelines in IDEM's enforcement case
 files were very comprehensive and organized including previous enforcement action
 history, which was helpful during the review. Penalty review sheets contained in
 enforcement case files were very detailed; however, the Region recommends that IDEM
 provide more information regarding economic benefit consideration.
- IDEM does an excellent job conducting compliance monitoring activities, making compliance determinations, and issuing appropriate enforcement actions. EPA's review indicated instances where although the activities were accurately documented in the file, the compliance status was not reflective of IDEM's determinations in the Air Facility System (AFS), which is a minimum data requirement.

Major SRF RCRA Subtitle C Program Findings

The Region would like to highlight IDEMs performance with respect to the following:

- The majority of IDEM's RCRA inspection reports are complete, contain sufficient information to support identified violations, and are completed in a timely manner. Inspection report quality has improved since the last SRF review, particularly with respect to the detail in inspection report narratives.
- IDEM excels in the issuance of timely and appropriate enforcement actions. For the year under review, all of IDEM's enforcement actions against SNCs were issued in a timely manner. All of the enforcement files reviewed indicated that IDEM's SNC determinations and associated enforcements were appropriate. IDEM's SNC identification rate is significantly greater than the national average, an indication that IDEM has a strong RCRA enforcement program.

Major	Follo	w-Up	Actions
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Recommendations and actions identified from the SRF review will be tracked in the SRF Tracker.

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State Review Framework

I. Background on the State Review Framework

The State Review Framework (SRF) is designed to ensure that EPA conducts nationally consistent oversight. It reviews the following local, state, and EPA compliance and enforcement programs:

- Clean Air Act Stationary Source
- Clean Water Act National Pollutant Discharge Elimination System
- Resource Conservation and Recovery Act Subtitle C

Reviews cover these program areas:

- Data completeness, timeliness, and quality
- Compliance monitoring inspection coverage, inspection quality, identification of violations, meeting commitments
- Enforcement actions appropriateness and timeliness, returning facilities to compliance
- Penalties calculation, assessment, and collection

Reviews are conducted in three phases:

- Analyzing information from the national data systems
- Reviewing a limited set of state files
- Development of findings and recommendations

Consultation is also built into the process. This ensures that EPA and the state understand the causes of issues and seek agreement on actions needed to address them.

SRF reports are designed to capture the information and agreements developed during the review process in order to facilitate program improvements. EPA also uses the information in the reports to develop a better understanding of enforcement and compliance nationwide, and to identify any issues that require a national response.

Reports provide factual information. They do not include determinations of overall program adequacy, nor are they used to compare or rank state programs.

Each state's programs are reviewed once every four years. The first round of SRF reviews began in FY 2004. The third round of reviews began in FY 2012 and will continue through FY 2016.

II. SRF Review Process

Review period: FY 2011

Key dates:

- Kickoff letter sent to state: June 29, 2012
- Kickoff meeting conducted: July 31, 2012
- Data metric analysis and file selection list sent to state: August 2, 2012
- On-site file review conducted: August September 2012
- Draft report sent to state: February 19, 2013
- Report finalized: May 17, 2013

Communication with the state: Throughout the SRF process, Region 5 communicated with IDEM through official letters sent to the IDEM Commissioner (attached in Appendix F) and continual conversations via phone and email. During the Opening Meeting, Region 5 presented a brief training of SRF Round 3 procedures and discussed issues and timelines for implementation in Indiana. In regard to file reviews, Region 5 opened the CAA file review with a meeting with IDEM personnel to discuss the file review steps. The majority of the CWA and RCRA file reviews were conducted electronically from the regional office and then completed at the IDEM offices where all file reviews closed with a discussion of initial review results.

State and EPA regional lead contacts for review:

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- CWA Ken Gunter/R5 (312-353-9076), Rhiannon Dee/R5 (312-886-4882), James Coleman/R5 (312-886-0148), Mark Stanifer/IDEM (317-232-8431), Martha Clark Mettler /IDEM (317-232-8402), Mary Hollingsworth/IDEM (317-233-0275), Don Daily/IDEM (317-234-2579), Gary Starks/IDEM (317-232-8694)
- RCRA- Todd Brown/R5 (312-886-6091), Bruce Kizer/IDEM (317-232-8857), John Crawford/IDEM (317-234-6946), Theresa Bordenkecher/IDEM (317-234-6961), Nancy Johnston/IDEM (317-232-7207), Jenny Dooley/IDEM (317-232-8925)

III. SRF Findings

Findings represent EPA's conclusions regarding state performance, and may be based on:

- Initial findings made during the data and/or file reviews
- Follow-up conversations with state agency personnel
- · Additional information collected to determine an issue's severity and root causes
- · Review of previous SRF reports, MOAs, and other data sources

There are four types of findings:

Good Practice: Activities, processes, or policies that the SRF metrics show are being implemented at the level of Meets Expectations, **and** are innovative and noteworthy, **and** can serve as models for other states. The explanation must discuss these innovative and noteworthy activities in detail. Furthermore, the state should be able to maintain high performance.

Meets Expectations: Describes a situation where either: a) no performance deficiencies are identified, or b) single or infrequent deficiencies are identified that do not constitute a pattern **or** problem. Generally, states are meeting expectations when falling between 91 to 100 percent of a national goal. The state is expected to maintain high performance.

Area for State Attention: The state has single or infrequent deficiencies that constitute a minor pattern or problem that does not pose a risk to human health or the environment. Generally, performance requires state attention when the state falls between 85 to 90 percent of a national goal. The state should correct these issues without additional EPA oversight. The state is expected to improve and achieve high performance. EPA may make recommendations to improve performance but they will not be monitored for completion.

Area for State Improvement: Activities, processes, or policies that SRF data and/or file metrics show as major problems requiring EPA oversight. These will generally be significant recurrent issues. However, there may be instances where single or infrequent cases reflect a major problem, particularly in instances where the total number of facilities under consideration is small. Generally, performance requires state improvement when the state falls below 85 percent of a national goal. Recommendations are required to address the root causes of these problems, and they must have well-defined timelines and milestones for completion. Recommendations will be monitored in the SRF Tracker.

Clean Water Act Findings

Element 1 — Data Completeness: Completeness of Minimum Data Requirements.

Finding

Area for State Attention

Description

Review of the fifteen data metrics under Element 1 shows that twelve of the MDRs were complete. Three MDRs were found to be incomplete.

Completeness of information entered into the ICIS-NPDES was reviewed for: active facility universe counts for all NPDES permit types including individual and general permits for major and non-major facilities; major permit limits and discharge monitoring reports (DMRs); major facilities with a manual override of reportable noncompliance/significant noncompliance (RNC/SNC) to compliant status; non-major permit limits and discharge monitoring reports (DMRs); informal action counts; formal action counts; and assessed penalties.

Although Data Metric 1A4 indicates zero active NPDES non-majors with general permits, in reality, there are 329 General Permits included as part of the universe of 1407 active NPDES non-Majors with individual permits. At any rate, the 329 general permits still represent a small percentage of the several thousand permitted or the more than one hundred inspected stormwater facilities covered by State Rules (7-12). As stated in the Executive Summary, IDEM should work on correcting the permit type discrepancy between general and individual permits, which is causing an erroneous 1A4 Data Metric result.

Explanation

Review of the data metrics under Element 1 shows that the MDRs were complete, with the exception of "DMR entrance rates for Major Facilities" which meets the SRF standard of 90-100% of a national goal, but not the national data system goal of 95% or greater. In addition, the Total Number of Informal Actions (1d1) is inaccurate due to the fact that IDEM is not entering all Notices of Violation into ICIS. The general permit universe is not being properly reported to ICIS. IDEM has reported the majority of its general permits as individual permits. The Region believes that IDEM should resolve the permit type discrepancy and enter all general permits and subsequent inspection and enforcement actions into ICIS to better reflect the full spectrum of work that IDEM is carrying out.

This finding is only an Area for State Attention because the Region believes that IDEM can improve performance in this area on its own without a recommendation.

Relevant metrics

Data Metric 1A4 – Zero active NPDES non-majors with general permits. **Data Metric 1B2** – 92.4% DMR Entry Rate for major facilities. National Goal >=95%. National Average 98.6%.

Data Metric 1E1 – 360 facilities with informal actions. See Data Metric Analysis table.

- Data Metric 1a4: The State Review Framework (SRF) Metrics Query results from OTIS for the review period of FFY 2011 show that there are no general permits in Indiana. There are actually 329 general permits for general permit rules 327 IAC 15-7 through 12. These permits are all in ICIS and are routinely inspected by the Office of Water Quality (OWQ) Compliance Branch staff. The inspection commitment is to inspect 25% percent of these facilities per year. Inspection and enforcement actions involving these permittees are currently entered into ICIS.
- Other facilities with general permit coverage under Rule 5 (construction storm water), Rule 6 (industrial storm water) and Rule 13 (MS4s) are not in ICIS. While these facilities are not in ICIS, they are entered and tracked in a state level data base.
- A metrics query for 2012 shows four general permits which are all Illinois permits that contain Indiana business addresses. IDEM requests that EPA remove these four Illinois permits from the Indiana list.
- Data Metric 1b2. The EPA SRF report for the review period shows a DMR entry rate for major NPDES facilities as 92.4%, as compared to the national average of 98.6% and the goal of 95%. The largest reason for not meeting the federal goal is that Indianapolis reports CSO discharge points semi-annually as prescribed by a Federal Consent Decree. IDEM received and entered these CSO DMRs after the review period. As a result, the actual value of DMR entry rate increased to 95.7% and 99.9% as of February 19, 2013, exceeding the national goal. The ICIS entry rate varies throughout the year because of the timing of the receipt of Indianapolis CSO DMRs.
- Data Metric 1d1: The OTIS SRF Metrics query does not include the numbers for this metric because it was not included in Round 3 SRF reviews. OWQ has not entered Notices of Violation (NOVs) into ICIS. In Indiana, per state statute, an NOV is the required official notice of initiation of a formal enforcement action. It is the beginning of enforcement. Because IDEM enters adopted Agreed Orders (AOs) into ICIS, the state finds entering NOVs into ICIS an unnecessary administrative burden that does not add additional transparency.
- Data Metric 1e1: As a point of clarity, OWQ issues informal

State response

enforcement actions in the form of Violation Letters. For permit holders with permit numbers beginning with IN0 or ING, violation letters may be initiated by the Compliance Data Section (CDS) through review of DMR data, or Inspection Section as part of an overall inspection report.

Recommendation

The Region recommends IDEM properly code general permits and enter all subsequent inspections and enforcement into ICIS.

	of Minimum Data Requirements.

Finding Area for State Improvement

Description No formal enforcement actions were linked in ICIS to the violations that

the actions addressed. Twenty-five of 39 reviewed files (64.1%) accurately

reflected data reported to the national data systems.

Explanation Data in fourteen of the 39 files reviewed were inaccurately reflected in

OTIS. Examples of inaccuracies noted are: 1) four files had no reported NOV dates; 2) one file had an incorrect NOV date reported; 3) two files had incorrect facility names reported; and 4) one file did not have a

violation letter reported.

Relevant metrics Data Metric 2A1 – Zero formal enforcement actions taken against major

facilities with enforcement violation type codes entered. National Goal is 95%.

File Metric 2B - 25 of 39 (64.1%) files reviewed where data are accurately reflected in the national data system.

State response

- Data Metric 2a1: IDEM works to ensure facilities in violation return to compliance. IDEM takes informal enforcement action including violation letters as well as formal enforcement action including NOVs and AOs where necessary. When taking enforcement action and entering the AO into ICIS, IDEM will resolve this administrative error by entering enforcement violation type codes.
- File Metric 2b: IDEM acknowledges minor administrative errors in some files. These errors have no impact on enforcement action or the Agency's work to address violations.

Recommendation

- By 60 days of the final report, IDEM should review current data entry procedures to reconcile issues found in this review as well as provide new or updated written procedures and training to staff to resolve data entry problems.
- Progress will be monitored by Region 5 through OTIS quarterly data pulls and steps will be taken as necessary to review implementation of recommended actions.

Element 3 — Timeliness of Data Entry: Timely entry of Minimum Data Requirements.			
Finding	Area for State Improvement		
Description	Thirty of 39 reviewed files (76.9%) demonstrated that mandatory data were entered in the national data system in a timely manner.		
Explanation	It is important that data is entered in a timely manner to ensure transparency for the public, regulated community, and national CWA planning.		
Relevant metrics	File Metric 3A – 30 of 39 (76.9%) timeliness of mandatory data entered in the national data system.		
State response	File Metric 3a: IDEM is responsible for entering data from approximately 1500 facilities throughout the state every month. IDEM enters 100% of the DMRs into ICIS by the 28 th of the following month. Late DMRs cannot be entered within that same timeframe.		
Recommendation	 By 60 days of the final report, IDEM should review current data entry procedures to reconcile issues found in this review as well as provide new or updated written procedures and training to staff to resolve data entry problems. Office of Water Quality should work with the Office of Land Quality to enter MDRs for CAFOs and Auto Salvage operations in ICIS. Progress will be monitored by Region 5 through OTIS quarterly data pulls and steps will be taken as necessary to review implementation of recommended actions. 		

Element 4 — Completion of Commitments: Meeting all enforcement and compliance commitments made in state/EPA agreements.

Finding	g	Meets	Expectation

Description

IDEM met eight of 8 inspection commitments (100%) per the negotiated state-specific Compliance Monitoring Strategy (CMS) Plan. IDEM met eight of nine CWA compliance and enforcement commitments (88.9%) other than CMS commitments. Overall, 16 of 17 commitments (94%) were met.

Explanation

IDEM's state-specific CMS is integrated into the state's biennial EnPPA from 2011 – 2013. Based on further review, EPA agrees that IDEM met the CMS categories which either had a specific measureable goal or an overall commitment to inspect based on state priorities (i.e. Metric 4A7, 4A8 & 4A9). With respect to the non-CMS planned commitments in the state's EnPPA, IDEM met eight of 9 commitments. In the next EnPPA cycle, EPA will discuss with IDEM how measureable commitments can be made for CMS commitments.

Relevant metrics

Metric 4A1 – 9 of 9 (100%) pretreatment compliance inspections.

Metric 4A2 - 78 of 70 (111.4%) SIUs by non-authorized POTWs.

Metric 4A3 – 9 of 9 (100%) SIU inspections by approved POTWs

Metric 4A4 – No CSO inspection commitments.

Metric 4A5 – No SSOs evaluated as part of CEI inspections.

Metric 4A6 – No Phase I MS4 inspection commitments.

Metric 4A7 – 28 Phase II MS4 inspections conducted.

Metric 4A8 – 31 Industrial stormwater inspections conducted.

Metric 4A9 – 230 Phase I & II stormwater construction inspections

conducted.

Metric 4A10 – 166 of 127 (130.7%) large & medium NPDES-permitted

CAFOs.

Metric 4A11 – 358 of 354 (101.1%) non-permitted CAFOs

Metric 4B – 8 of 9 (88.9%) planned commitments completed

State response

• IDEM balances its work priorities and resources not solely on the national level goals, but also based on state goals. In Indiana, IDEM focused its resources on ensuring MS4 entities are on track, following up on an Auto Salvage Yard initiative, and on construction sites outside of an MS4 Area.

IDEM has six storm water staff, including an MS4 Program Coordinator, who conduct inspections and audits. This year IDEM focused on the following areas:

MS4 Program (Metric 4A7):

IDEM focused staff on conducting MS4 Audits. This effort was a

priority to ensure that local MS4 entities were on track to effectively administer local storm water programs. If local entities effectively administer their MS4 programs, the programs are more successful and Construction Sites in those areas would be more effectively regulated at the local level. Metric 4A7 for MS4 Phase II entities was 96.6%. This was achieved by placing a greater emphasis on MS4 compliance.

Industrial Sites (Metric 4A8):

This year IDEM staff focused on Auto Salvage sites, which are a major contributor of pollutants in storm water runoff. The Office of Land Quality (OLQ) performs inspections through the Auto Salvage Initiative. OLQ staff members assess compliance with industrial storm water permits during inspections. At the time of this submittal, the program area had not yet received the number of inspections conducted by OLQ. They will be submitted as soon as they are available. In addition, during the year, an IDEM inspector devoted to inspecting industrial sites left the program.

Construction Sites (Metric 4A9):

For construction sites, IDEM's priority is to inspect those projects that are located outside of an MS4 area. In Indiana, the primary authority to regulate construction projects within an MS4 is the responsibility of the MS4. Each MS4 is required to carry out compliance inspections as well as enforcement. Therefore, the universe of projects on which IDEM metrics should be based are only those projects outside of an MS4 and those projects specifically owned and operated by an MS4. Yet, EPA evaluates Indiana based on the total number of construction sites that have obtained a permit in the reporting period as well as those that continued to operate from previous years. This number reflects the total number of active construction sites state wide. EPA should evaluate Indiana based only on those sites located outside of an MS4 or owned and operated by an MS4. IDEM has raised this issue to EPA several years ago and has not received a response. IDEM, therefore, will report the total number of projects permitted as well as a subset—those for which IDEM has primary authority to regulate.

Future Initiative:

In the future, IDEM will base its compliance inspection goals on the number of projects for which IDEM has primary authority to regulate. In addition, IDEM will be working to develop ways to track the number of construction inspections performed by each MS4. Finally, IDEM is developing a new data base that will house the construction site run off program, the industrial site run off program, and MS4 program data to aid in the creation of reports for EPA.

• Metric 4b:

This metric is for planned commitments other than CMS commitments. EPA's finding above states that IDEM met expectations for five of seven commitments. However, the Metric 4b Calculation table shows IDEM having met 7 of 9 commitments, including:

- CSO Long Term Control Plan compliance implementation
- Review and approval of CSO LTCPs and Consent Decrees
- Update EPA on the progress of the State SSO Strategy
- Evaluate stormwater violations and take appropriate action
- Attend EPA pretreatment training and submit plan to EPA
- Conduct QA/QC reviews of self monitoring data
- Follow up on Round 1 EPA SRF review recommendations.

The table illustrates that IDEM did not meet the goal of maintaining the SNC rate for majors, or the entry of SEVs into ICIS. Discussions about how to manage tracking of SEVs are ongoing. There is some confusion however over the SNC data as illustrated, because it appears that IDEM did actually meet both the annual criteria for this metric. That being the case, IDEM should have met 8 of 9 metrics for 89%.

Recommendation

No action needed.

Element 5 — Inspection Coverage: Completion of planned inspections.

Finding

Meets Expectations

Description

Three of three national inspection commitments (100%) were met.

Explanation

IDEM met national inspections commitments for NPDES majors and non-majors; and state specific CMS standard for wet weather programs. With respect to Data Metric 5B2, current result for this Metric is misleading. Please note that 329 State rule general permits are in ICIS, but entered as individual NPDES permit types. By the same token, IDEM exceeded their state-specific CMS commitment of 25%. Based on further review, EPA agrees that all three of the inspection commitments were met

Relevant metrics

Metric 4A6 – No Phase I MS4 inspection commitments.

Metric 4A7 – 28 Phase II MS4 inspections.

Metric 4A8 – 31 Industrial stormwater inspections.

Metric 4A9 – 230 Phase I & II stormwater construction inspections. **Data Metric 5A1** – 114 of 192 (59.4%) inspection NPDES-majors. National Goal is 100% state CMS Plan commitments. National Average is 54.4%.

Data Metric 5B1 – 816 of 1407 (58.0%) inspection NPDES non-majors. National Goal is 100% state CMS Plan commitments. National Average is 23.7%.

Data Metric 5B2 – Zero inspection NPDES non-majors with general permit. National Goal 100% state CMS Plan commitments. National Average is 19.2%.

State response

- Data Metric 5a1: The Compliance Monitoring Strategy commitment is to inspect 50% of the universe of major dischargers annually. The universe of major dischargers is 192. Fifty percent of the universe of major dischargers is 96 facilities. Therefore, with 116 major dischargers having been inspected during the review period, and a goal of 96, the actual inspection coverage was 121% of the CMS commitment, which exceeds the CMS/ENPPA commitment.
- Data Metric 5b1: The CMS commitment is to inspect 50% of the universe of traditional/individual minors annually. The universe of minors is 1407. Of those 329 are general permits (ING) and 1078 are traditional individual permits (IN0). Fifty percent of 1078 is 539. Therefore with 677 inspections having been completed at traditional minors (IN0), and a goal of 539, the actual inspection coverage was 126% of the commitment, which exceeds the CMS/ENPPA commitment.

- Data Metric 5b2: IDEM has a universe of 329 general permits under 327 IAC 15, Rules 7 through 12. The CMS plan commitment for this group of general permits is to inspect 25% of the universe annually. Therefore, IDEM has 82 facilities to inspect (twenty five percent of 329). During the review period, OWQ inspectors completed 139 inspections of these general permit facilities, which is 170% of the commitment, significantly exceeding the CMS commitment.
- EPA found that OWQ met two of its three national inspection commitments for Element 5, and therefore this is an "Area for state improvement." In fact, OWQ met all three of its commitments under Element 5 and should be evaluated as "Meets Expectations."

Recommendation

No action needed.

Element 6 — Quality of Inspection Reports: Proper and accurate documentation of observations and timely report completion.

Finding Area for State Attention

Description Thirty-six of 38 reviewed inspection reports (94.7%) provided sufficient

documentation to determine compliance. Thirty-two of 38 reviewed

inspection reports (84.2%) were timely.

Explanation Two of the 38 inspection reports reviewed were incomplete or did not

> provide sufficient information to determine compliance. Examples of inspection report discrepancies include: 1) inspection did not capture four stormwater violations as of 4/20/11 failure to develop, monitor, inspect, and maintain records; and 2) report lacked permit/regulation citations and

failed to mention that this was an ongoing problem area for the city.

This finding is only an Area for State Attention because the Region believes that IDEM can improve performance in this area on its own

without a recommendation.

Relevant metrics File Metric 6A - 36 of 38 (94.7%) inspection reports reviewed that

> provide sufficient documentation to determine compliance at the facility File Metric 6B – 32 of 38 (84.2%) inspection reports completed within

prescribed timeframe.

State response File Metrics 6a and 6b: For Metric 6a, it is not clear which two files EPA

> found to be deficient so it is not possible to determine exactly what improvements need to be made. For Metric 6b, it is important to note that for the inspection reports EPA selected, the average time for review of inspection reports was 27 days, well within the 45 day time period. For the universe of inspection reports in 2011, the average timeframe for issuance

> of reports was 29 days, well within the timeframes. In an effort to increase both the quality and timeliness of inspection reports, IDEM began implementing a Digital Inspector software package in 2012 and is

establishing processes for electronic review and approval of all inspection

reports in 2013.

Recommendation No action needed. Element 7 — Identification of Alleged Violations: Compliance determinations accurately made and promptly reported in national database based on inspection reports and other compliance monitoring information.

Finding Area for State Improvement

Description It appears that single event violations (SEVs) are not being reported to

ICIS-NPDES as required. Thirty-four of 35 reviewed inspection reports

(97.1%) led to an accurate compliance determination.

Explanation Based on the Data Metric Analysis (DMA), it appears that IDEM is not fully reporting violations to ICIS-NPDES, and thus the OTIS report is not

representative of actual violation identification or resolution in Indiana.

Furthermore, to confirm the number of SEVs stated on the DMA (7A1, 7A2) a detailed review of the SEVs in ICIS was performed and found that the SEVs were either entered by EPA or had violation dates as early as FY89. In addition, as part of the file review process and as indicated in Element 8, there were violations found as a result of inspections, but not established as EPA SEVs and/or SNC and not recorded in ICIS-NPDES. As a general rule, compliance schedules related to enforcement actions and permit schedules should be managed accordingly to track compliance and prevent erroneous conclusions.

A similar finding was noted in IDEM's Round 1 SRF report and remains an issue.

Relevant metrics Data Metric 7A1 - 6 major NPDES facilities with SEVs.

Data Metric 7A2 – 18 non-major NPDES facilities with SEVs.

Data Metric 7B1 - 6 facilities with compliance schedule violations.

Data Metric 7C1 – 133 facilities with permit schedule violations.

Data Metric 7D1 – 127 of 192 (66.1%) major facilities in non-

compliance.

File Metric 7E -34 of 35 (97.1%) inspection reports reviewed that led to

an accurate compliance determination.

Data Metric 7F1 – 289 non-major facilities in Category 1 non-

compliance.

Data Metric 7G1 – 435 non-major facilities in Category 2 non-

compliance.

Data Metric 7H1 – 730 of 1407 (51.9%) non-major facilities in non-

compliance.

File Metric 8B – 0 of 26 (0%) percentage of SEVs accurately identified as

SNC or non-SNC.

File Metric 8C - 0 of 1 (0%) SEVs identified as SNC that are reported

timely.

State response

- Data Metric 7a1 and 2: OWQ has not been entering Single Event Violations (SEVs) into ICIS. OWQ has not made a commitment to enter this information into ICIS. Most of these violations are not recurring and are addressed by the permittee upon receipt of a violation letter and therefore are resolved quickly. Those that are not addressed through informal actions would become enforcement actions which are recorded in ICIS by reporting Agreed Orders. EPA's request means that IDEM would need to enter a single event violation into ICIS and shortly afterward remove it. Requesting states to enter SEVs into ICIS and then removing them shortly afterward places an unreasonable administrative burden that has significant administrative costs with little environmental benefit.
- Data Metric 7b: A review of the six facilities with state enforcement compliance schedule violations reveals that four of the six have terminated permits. There cannot be a violation when there is no longer a permit or a schedule. The other two facilities listed, Hammond Sanitary District and Crawfordsville are both subjects of Federal enforcement actions and IDEM is not able to clean up this data because it was entered and can only be edited by EPA.
- Data Metric 7c: The query of the FFY 2011data shows 133 facilities with permit schedule violations. 116 of these permits were terminated, some as long ago as the 1980s. OWQ staff have manually terminated the violations in ICIS for those facilities with terminated permits, and have conducted other appropriate data clean up. As of the writing of this response the count of permit schedule violations stands at 13. Some of these old violations may have previously been terminated but were re-activated when data was migrated from PCS to ICIS.
- Data Metric 7d: The title "Major Facilities in Noncompliance" is misleading to the reader because it implies that these facilities are and/or remain in noncompliance. This metric is illustrating the number of major dischargers that reported any violation during the review period. These violations do not rise to the level of requiring a response from the agency because they were not recurring and did not rise to the level of Significant Noncompliance. Other violations among this set were addressed by informal enforcement actions. OWQ does not dispute the number but does not agree with the way it is portrayed.
- File Metric 7e: It is OWQ's intent to accurately determine compliance in all inspection reports.
- Data Metrics 7f and g: The numbers reported do not reflect any formal or informal enforcement actions IDEM took in response to the violations.



- Data Metric 7h: OWQ's comment is the same here as for data metric 7d.
- By 90 days of the final report, in addition to data entry actions identified under Elements 2 and 3, IDEM must review national Single Event Violation (SEV) guidance and develop a plan that addresses identification and resolution of compliance schedule, permit schedule, and documentation of SEVs in ICIS-NPDES.
- By 120 days of the final report, solutions to identified issues that are included in the plan must be written into IDEM policy.
- Progress will be monitored by Region 5 and steps will be taken as necessary to review implementation of recommended actions.

Element 8 — Identification of SNC and HPV: Accurate identification of significant noncompliance and high-priority violations, and timely entry into the national database.

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Area for State Improvement

Description

IDEM's SNC rate is 13.20%, which is better than national average. Zero of 26 reviewed SEVs (0%) were accurately identified as SNC or non-SNC and reported timely.

Explanation

IDEM's SNC rate is less than the national average, which is a positive indicator. However, during the file review, the Region observed that no SEVs were being reported and/or appropriately being identified as SNC. This may artificially lower IDEM's SNC rate.

IDEM has stated that they do not have the resources to enter SEVs into ICIS-NPDES, beginning with the SRF Round 1. The finding is the same for the SRF Round 2 and the need for a plan to address SEVs as required by guidance remains.

Relevant metrics

Data Metric 8A1 – 26 major facilities in SNC.

Data Metric 8A2 – 26 of 197 (13.2%) percentage of major facilities in

SNC

File Metric 8B – 0 of 26 (0%) percentage of SEVs accurately identified as SNC or non-SNC

File Metric 8C - 0 of 1 (0%) SEVs identified as SNC that are reported timely.

State response

File Metrics 8b and c: OWQ has not been entering Single Event Violations (SEVs) into ICIS. OWQ has not made a commitment to enter this information into ICIS. Most of these violations are not recurring and are addressed by the permittee upon receipt of a violation letter and therefore are resolved quickly. Those that are not addressed through informal actions would become enforcement actions which are recorded in ICIS by reporting Agreed Orders. EPA's request means that IDEM would need to enter a single event violation into ICIS and shortly afterward remove it. Requesting states to enter SEVs into ICIS and then removing them shortly afterward places an unreasonable administrative burden that has significant administrative costs with little environmental benefit.

Recommendation

 By 90 days of the final report, in addition to data entry actions identified under Elements 2 and 3, IDEM must review national Single Event Violation (SEV) guidance and develop a plan that addresses identification and resolution of compliance schedules, permit schedules, and documentation and SNC escalation of SEVs in ICIS-NPDES.



- By 120 days of the final report, solutions to identified issues that are included in the plan must be written into IDEM policy.
- Progress will be monitored by Region 5 and steps will be taken as necessary to review implementation of recommended actions.

Element 9 — Enforcement Actions Promote Return to Compliance: Enforcement actions include required corrective action that will return facilities to compliance in specified timeframe.

Finding	Meets Expectations
Description	Twenty of 20 reviewed enforcement responses (100%) returned, or will return, a source in violation to compliance.
Explanation	No performance deficiencies were identified by the Region.
Relevant metrics	File Metric 9A – 20 of 20 (100%) percentage of enforcement responses that return or will return source in SNC to compliance.
State response	IDEM strives to meet all minimum data requirements and works with Region 5 to address issues as they arise.
Recommendation	No action needed.

Element 10 — Timely and Appropriate Action: Timely and appropriate enforcement action in accordance with policy relating to specific media.

Finding

Area for State Improvement

Description

The data metric found zero of 11 reviewed facilities (0%) with enforcement actions during the review year addressed SNC violations at major facilities in a timely manner; however, EPA conducted further review explained below. Ten of 11 reviewed enforcement responses (90.9%) addressed SNC that are appropriate to the violations.

Explanation

The file review shows that SNCs are being addressed appropriately; however, the data metric 10A1 indicates that addressing actions are not being accomplished or reported to ICIS-NPDES in a timely manner. With respect to data metric 10A1, a detailed review was performed on the 11 facilities. The review found that 4 of the 11 facilities should not have been included as part of the universe for various reasons (e.g. 2 are federal EPA cases). Of the remaining 7, 3 responses were not timely, 2 facilities had previous enforcement and continuing violations, and 2 returned to compliance the next quarter without formal enforcement.

A similar finding was noted in IDEM's Round 1 SRF report and remains an issue.

Relevant metrics

Data Metric 10A1 - 0 of 11 (0%) major facilities with timely action as appropriate. National Goal is 98%.

File Metric 10B - 10 of 11 (90.9%) enforcement responses reviewed that address SNC that are appropriate to the violation.

State response

- Data Metric 10a: IDEM's enforcement process and steps are outlined in state statute. IDEM measures timely and appropriate enforcement action by tracking the time it takes to issue an Agreed Order starting from the time a Notice of Violation was sent to a permittee. IDEM allows for a year from the time of the issuance of an NOV to the time an Agreed Order is signed. IDEM believes this is the most appropriate measure of whether or not timely enforcement action is taken and meets those timeframes.
- It appears that there is something significantly flawed with EPA's national metric. According to the OTIS SRF Metrics Query, every state in Region 5 has a zero percent success rate. In fact, the current actual national average for states is only 3.1% and for EPA it is only 3.7%. It is unclear what timeframes the EPA metric is measuring and what the criteria are for an enforcement action to be considered timely.

Recommendation

- By 90 days of the final report, IDEM must review national guidance and develop a plan for identifying, addressing, and reporting SNC violations in ICIS-NPDES in a timely manner.
- By 120 days of the final report, developed procedures to ensure timeliness from the plan must be written into IDEM policy.
- Progress will be monitored by Region 5 and steps will be taken as necessary to review implementation of recommended actions.

Element 11 — Penalty Calculation Method: Documentation of gravity and economic benefit in initial penalty calculations using BEN model or other method to produce results consistent with national policy and guidance.

Finding	Meets Expectations
Description	Fourteen of 15 reviewed penalty calculations (93.5%) considered and included, where appropriate, gravity and economic benefit.
Explanation	One penalty calculation did not document economic benefit consideration.
Relevant metrics	File Metric 11A – 14 of 15 (93.5%) penalty calculations that include gravity and economic benefit.
State response	File Metric 11a: It is OWQ policy to consider both gravity and economic benefit in every formal enforcement case, and to document such in the Briefing Memo. IDEM strives to meet all minimum data requirements and works with EPA Region 5 to address issues as they arise.
Recommendation	No action needed.

Element 12 — Final Penalty Assessment and Collection: Differences between initial and final penalty and collection of final penalty documented in file.

Finding Meets Expectations

Description Fifteen of 15 reviewed penalties (100%) documented the rationale for the

final value assessed compared to the initial value assessed. Fourteen of 14

reviewed penalty files (100%) documented collection of penalty.

Explanation No performance deficiencies were identified by the Region.

Relevant metrics File Metric 12A – 15 of 15 (100%) documentation on difference between

initial and final penalty.

File Metric 12B – 14 of 14 (100%) penalties collected.

State response IDEM strives to meet all minimum data requirements and works with EPA

Region 5 to address issues as they arise.

Recommendation No action needed.

Clean Air Act Findings

Recommendation No action needed.

Element 1 — Data Completeness: Completeness of Minimum Data Requirements.			
Finding	Meets Expectations		
Description	Review of the thirty-three data metrics under Element 1 shows that all of the MDRs were complete.		
Explanation	This element measures whether reporting of MDRs into AFS is complete for: federally reportable majors, synthetic minors, minors, Tier I minor and other sources (CMS sources), Tier I minor and other sources (active HPVs) and Tier II minors and others (formal enforcement); NSPS Part 60 universe, NESHAP Part 61 universe, MACT Part 63 universe, and Title V universe; Tier I sources with FCEs -source count, FCEs at Tier I sources -activity count, Tier II sources with violations and Tier II sources with violations; informal actions issued to Tier I sources and Tier I sources subject to informal actions; HPV activity count and HPV source count; formal enforcement actions issued to Tier I sources, Tier I sources with formal actions, formal enforcement actions issued to Tier II sources, and Tier II sources with formal actions; total assessed penalties and formal enforcement actions with penalty assessed; stack tests with passing results, stack tests with failing results, stack tests with pending results, stack tests without a results code, stack tests observed and reviewed, and stack tests reviewed only; and Title V annual compliance certifications reviewed.		
Relevant metrics	Data Metrics 1A1-6, 1B1-4, 1C1-4, 1D1-2, 1E1-2, 1F1-2, 1G1-4, 1H1-2, 1I1-6, and 1J - no performance deficiencies were identified by the Region. See Data Metric Analysis table.		
State response	IDEM strives to meet all minimum data requirements and works with EPA Region 5 to address issues as they arise.		

Element 2 — Data Accuracy: Accuracy of Minimum Data Requirements.

Finding

Area for State Improvement

Description

Four Title V major sources were missing a CMS code in for the review year. Eighteen of 36 reviewed files (50.0%) accurately reflected MDR data reported to AFS.

Explanation

Data Metric 2A uses the historic CMS code captured on the last day of the review year for sources classified as major. Major sources without a CMS code may be an indication that they are not part of a CMS plan. In accordance with the CMS policy, all Title V major sources should be assigned a CMS code and an evaluation frequency.

Data in eighteen of the 36 files reviewed were inaccurately reflected in OTIS. Examples of inaccuracies noted are: 1) seven files had incorrect addresses; 2) three files had incorrect inspection dates; 3) two files did not have failed stack tests reported; 3) three files has inaccurate compliance status reported; 4) one file was reported as a Title V instead of a FESOP; 5) three files were missing Title V reviews; and 6) two files were missing CMR documentation.

A similar finding was noted in IDEM's Round 1 SRF report and remains an issue.

Relevant metrics

Data Metric 2A – 4 major sources missing CMS codes. **File Metric 2B** – 18 of 36 files (50.0%) accurate MDR data in AFS.

State response

- IDEM believes the findings are not accurate. IDEM flagged the CMS codes as instructed by EPA Region 5. Three (3) of the 4 sources (003-00383, 005-00104, 141-00574) missing CMS codes were added into AFS on July 7, 2011. They were new sources added to AFS after the CMS was negotiated and accepted by EPA. Note that CMS Flags for FY11 should have been set during September 2010 with back and forth revisions and corrections done during October 2010 that same year. EPA Region 5 instructed IDEM at the time that once the CMS flags were set, they were not supposed to be touched until September 2011 the following year (for the next CMS planning cycle). Therefore, CMS Flags were blank simply because they were supposed to be blank. IDEM acknowledges that the 4th source (039-00620) missing the CMS flag should have been included as part of IDEM's FY11 CMS. This was a new source added into AFS on Nov 24, 2008.
- The three files reported as having inaccurate compliance status reported is incorrect. The compliance determination contained in

the Notice of Inspection is a preliminary finding and provided at the time of the inspection and not a final determination. The Notice of Inspection is used to provide documentation of the oral report given to the source about the preliminary findings. It is not a final compliance determination. On some occasions, the inspector will mark additional information required on the Notice of Inspection to allow time for additional research or to review additional records prior to making a final compliance determination. The final compliance determination is contained in the Inspection Report or CMR and Inspection Summary letters as it was in these cases. IDEM believes the 3 files were accurately reported to AFS.

• Citizens Gas and Coke Utility should not have been included in the SRF because they ceased operation in 2007. Their Title V permit was renewed in 2011 to preserve any emission credits and to aid with sale or redevelopment of the property.

Recommendation

- By 60 days of the final report, EPA will pull OTIS data and discuss with IDEM during monthly conference calls concerning data entry.
- If issues are not resolved through monthly conference calls, IDEM will propose a plan to address them, including specific actions to address data gaps identified above and milestones for implementation.
- Progress will be monitored by Region 5 through monthly conference calls and steps will be taken as necessary to review implementation of recommended actions.

Element 3 — Timeliness of Data Entry: Timely entry of Minimum Data Requirements.

Finding

Area for State Improvement

Description

Twenty HPV actions were reported to AFS beyond 60 days. The national goal for timely entry (entered in 60 days or less) of compliance and enforcement MDRs and (entered in 120 days or less) of stack test MDRs is 100%. IDEM entered 91.4% compliance monitoring MDRS, 87.3% enforcement MDRs, and 39.8% stack test MDRs in a timely manner.

Explanation

EPA realizes that the percentages established in the SRF report do not reflect the whole picture of the compliance and enforcement activities conducted by IDEM, but they provide a process to effectively manage oversight. EPA suggests recommendations to IDEM for improvements in order to run a more efficient compliance and enforcement state program.

A similar finding was noted in IDEM's Round 1 SRF report and remains an issue.

Relevant metrics

Data Metric 3A1 – 8 timely entries of HPV determinations. National Goal is<60 days.

Data Metric 3A2 – 20 untimely entries of HPV determinations. National Goal is <60 days.

Data Metric 3B1 – 91.4% timely reporting of Compliance monitoring MDRs. National Goal is 100%. National Average is 78.6%.

Data Metric 3B2 – 39.8% timely reporting of stack test MDRs. National Goal is 100%. National Average is 75.5%.

Data Metric 3B3 – 87.3% timely reporting of enforcement MDRs. National Goal is 100%. National Average is 76.1%.

State response

- IDEM has improved significantly in the area of timely entry of HPV data from the September 28, 2006 SRF Final Report. IDEM has changed its enforcement process and operating procedures to identify HPV's earlier in the compliance and enforcement process. We have implemented standard operating procedures and a checklist to identify HPVs earlier in the process.
- Metric 3B2 is not an accurate reflection of the requirement to submit stack test results. NESHAP test reports are required to be reported by sources within 60 days. Requiring the agency to enter the results before the results are even submitted makes the metric unattainable. The General Provisions in 40 CFR 63.7 allows sources to submit the results within 60 days of completion of a test. EPA thought that the 60 day Data Metric 3B2 was unreasonable and has revised the metric to 120 days.
- IDEM has already updated standard operating procedures and

provided training to staff responsible for reporting stack tests to ensure stack test results are entered in the data system within 60-120 days of receipt of the test results. IDEM has already improved to 91.7% reporting of stack test MDRs for 2013 data.

Recommendation

- By 60 days of the final report, IDEM will update its standard operating procedures and provide training to staff responsible for reporting HPV determinations and stack tests MDRs to AFS.
- If issues are not resolved through monthly conference calls, IDEM will propose a plan to address them, including specific actions to address data gaps identified above and milestones for implementation.
- Progress will be monitored by Region 5 through monthly conference calls and steps will be taken as necessary to review implementation of recommended actions.

Element 4 —	Completion of	'Commitments	: Meeting all	enforcement a	nd compliance
communents	made in state/	EPA agreemen	us.		

Finding	Meets Expectations
Description	347 of 236 (147.0%) planned Title V Major FCEs were completed. 173 of 35 (494.3%) planned SM-80 FCEs were completed. Three of three compliance and enforcement commitments other than CMS commitments were completed.
Explanation	All EnPPA and non-EnPPA commitments were met or exceeded.
	IDEM's management and staff were very helpful, organized and knowledgeable of their Air Compliance and Enforcement program. The Virtual File Cabinet (online file system) was easy to use, especially with the information IDEM provided the workgroup during the review.
	Briefing Memos in enforcement case files were excellent and very detailed which included previous enforcement action history. Also in the enforcement case files was an Enforcement Action Timeline which was very organized and helpful during the review. There were a number of checklists developed and used by IDEM that were excellent. These checklists included Title V ACC review sheet, HPV checklist, Notice of Inspection form, Inspection Summary letter with CMR, etc. The checklists assisted in providing specific information the reviewer was looking for.
Relevant metrics	File Metric 4A1 – 347 of 236 (147.0%) Title V Major FCEs. File Metric 4A2 – 173 of 35 (494.3%) SM-80 FCEs. File Metric 4B – 3 of 3 (100%) planned commitments completed.
State response	IDEM appreciates EPA's recognition of our efforts to meet all commitments.
Recommendation	No action needed.

Element 5 — **Inspection Coverage: Completion of planned inspections.**

Finding Area for State Attention

Description 85.1% of CMS majors and mega-sites received an FCE. 86.4% of CMS

SM-80s received an FCE. IDEM has reviewed Title V annual compliance

certificates (ACC) for 88.3% of the active Title V universe.

Explanation IDEM completed FCEs at 343 of 403 at majors and mega-sites, 178 of 206

FCEs at SM-80s, and 534 of 605 of the active Title V universe had Title V

annual compliance certificate reviews completed.

Based on EPA findings under CAA Element 4, the Region believes that performance under Element 4 metrics in meeting inspection commitments under the state's compliance monitoring strategy plan is a more accurate characterization of state performance than those reported under Element 5. Element 4 examines the specific universe of facilities that the state

committed to inspect, rather than the more general set of all facilities included under Element 5 inspection coverage metrics. See Element 4

discussion for additional details.

Relevant metrics Data Metric 5A – 343 of 403 (85.1%) FCE Coverage Major. National

Goal 100%. National Average 90.0%.

Data Metric 5B – 178 of 206 (86.4%) FCE Coverage SM-80. National

Goal 100%. National Average 90.6%.

Data Metric 5E – 534 of 605 (88.3%) Title V ACCs Reviews Completed.

National Goal 100%. National Average 72.5%.

State response IDEM believes the data metric results are higher than identified by EPA.

Some of this may be attributed to timeliness of data uploads, data uploaded past the freeze date (typically Nov 30th each year), duplication, and the received dates of annual compliance certifications (ACC's). IDEM identified a list of 25 ACC's that were timely uploaded to AFS as part of our FY11 CMS Plan that were not included in the list of 234 compiled by the EPA. All but one of the 25 ACCs were timely uploaded to AFS. IDEM's correct total should have then been 558 (534+24) instead of the

534 EPA reported. This information was provided to EPA Region 5, but

not included in the SRF.

Recommendation No action needed.

Element 6 — Quality of Inspection Reports: Proper and accurate documentation of observations and timely report completion.

Finding

Area for State Improvement

Description

Of the 31 full compliance evaluations reviewed, most files had one or more of the Compliance Monitoring (CMR) checklist criteria missing or incomplete. Fourteen of 31 reviewed FCEs (45.2%) met all criteria in the CMR checklist. However, many (28) of the 31 files reviewed (90.3%) provided sufficient documentation to determine source compliance.

Explanation

Seventeen of the 31 CMRs reviewed were partially incomplete. Examples of CMR discrepancies include: 1) four CMRs had incorrect or missing address information; 2) seven CMRs were missing previous enforcement action history; 3) three CMRs did not have CMS checked, which would indicate an FCE as per IDEM's CMS Plan and instead Commitment was checked, therefore, it was unclear if it was actually an FCE conducted; 4) five CMRs lacked process descriptions; and 5) five CMRs recorded sources' names incorrectly.

A similar finding was noted in IDEM's Round 1 SRF report and remains an issue.

Relevant metrics

File Metric 6A – 14 of 31 (45.2%) documentation of FCE elements. File Metric 6B – 28 of 31 (90.3%) CMRs with sufficient documentation to determine compliance.

State response

IDEM believes the inspection reports or CMRs accurately reflect the findings and information provided at the time of the inspections. For example, some sources did not have any enforcement history. Therefore, there was nothing to include other than a response that there were no previous compliance issues. The observations are subjective and IDEM believes the inspection reports or CMR templates include sufficient documentation of the FCE elements and sufficient documentation to determine compliance of the source. IDEM is not required by the CMS to follow a particular format. Another example is that an inspection report or CMR marked as a Commitment and not as a CMS is still reported as an FCE. IDEM accurately reported the FCEs to AFS.

Recommendation

- By 30 days of the final report, EPA and IDEM will meet to discuss and analyze IDEM's FCE/CMR template to ensure that it contains the required elements of FCEs and CMRs.
- If it is found that the template and/or procedure to use the template need to be updated, IDEM will complete the update and provide inspection staff guidance on FCE and CMR completeness by 90



- days of the final report.
- Progress will be monitored by Region 5 through monthly conference calls and steps will be taken as necessary to review implementation of recommended actions.

Element 7 — Identification of Alleged Violations: Compliance determinations accurately made and promptly reported in national database based on inspection reports and other compliance monitoring information.

Finding

Area for State Improvement

Description

Fourteen of 32 reviewed CMRs or source files led to accurate compliance determinations and were accurately reported in AFS. Twenty-nine of 45 Tier I sources (64.4%) that received a notice of violation (informal enforcement action) during the review year and a compliance status of either in violation or meeting schedule were recorded in AFS during the review year.

Explanation

IDEM accurately identifies violations, however, reporting of the violations are not accurately reflected in AFS. Eighteen of 32 reviewed CMRs containing information and documentation used by IDEM to determine compliance were inaccurately reported in AFS. "Three Year Compliance Status by Quarter" section of the OTIS Detailed Facility Report (DFR) did not match information found in 18 CMRs reviewed.

A similar finding was noted in IDEM's Round 1 SRF report and remains an issue.

Relevant metrics

File Metric 7A – 14 of 32 (43.8%) accuracy of compliance determinations. **Data Metric 7B1** – 29 of 45 (64.4%) alleged violations reported per informal enforcement actions (Tier I only). National Goal 100%. National Average 62.2%.

Data Metric 7B2 – 8 of 14 (57.1%) alleged violations reported per failed stack tests. National Average 54.0%.

Data Metric 7B3 – 18 of 20 (90.0%) alleged violations reported per HPV identified. National Goal 100%. National Average 69.6%.

State response

- IDEM believes the data metric results are higher than identified by EPA.
- Metric 7A Most of sources at issue had "unknown" compliance status in database. "Unknown" will supersede "compliance" in AFS/OTIS/ECHO. IDEM does not modify compliance status, except for HPV cases (formal or informal). Informal enforcement actions such as the issuance of a Violation Letter are not reported to AFS unless the violations are HPV.
- The historic status of many sources has remained static.
 Historically, sources were created in "unknown" status. AFS can
 auto change certain statuses to "unknown" items such as late ACC
 submission. EPA made mass changes to specific air program
 and/or pollutants to "unknown" when rules changed. EPA made

- source specific individual historic changes prior to IDEM taking responsibility for own data entry (circa 2008-2009). These issues were raised to Lisa Lund at EPA HQ in 2010.
- EPA identified other sources claiming wrong compliance status. The most frequent cause is due to date entry:
 - Changing a compliance status in AFS begins on the date status was changed (EPA HQ/TRC can do retroactive dates). OTIS/ECHO only shows the worst case for the quarter (i.e. a status change within a quarter won't be evident until the following quarter),
 - Only worst case is shown aka "bubble up." For example, Citizen Energy Group (EPA field shows violation, State Field shows meeting compliance status)
- As discussed in Metric 2B, the compliance determination contained in the Notice of Inspection is a preliminary finding. On some occasions, the inspector will mark additional information required on the Notice of Inspection to allow time for additional research or to review additional records prior to making a final compliance determination. The final compliance determination is contained in the Inspection Report or CMR and Inspection Summary letters as it was in these cases and accurately reported to AFS.

Recommendation

- Solutions to issues regarding data entry will be resolved under Elements 2 and 3 of this report.
- If issues are not resolved through monthly conference calls, IDEM will propose a plan to address them, including specific actions to address data gaps identified above and milestones for implementation.
- Progress will be monitored by Region 5 through monthly conference calls and steps will be taken as necessary to review implementation of recommended actions.

Element 8 — Identification of SNC and HPV: Accurate identification of significant noncompliance and high-priority violations, and timely entry into the national database.

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Area for State Improvement

Description

IDEM's HPV discovery rate is 3.2%, which is lower than the national average of 3.9%. Thirteen of 16 reviewed violations (81.3%) were accurately determined to be HPVs.

Explanation

Three of the 16 violations reviewed were inaccurately determined to be HPVs for the following reasons: 1) no documentation proving IDEM determined the Title V certification violation to be non-HPV/non-substantial; 2) HPV Checklist states day zero date after the inspection and stack test reviews, however, the DFR states source was not an HPV; and 3) DFR shows "unaddressed-state" for Quarter 9, no documentation in file for any formal enforcement action.

A similar finding was noted in IDEM's Round 1 SRF report and remains an issue.

Relevant metrics

Data Metric 8A - 20 of 630 (3.2%) HPV discovery rate per major facility universe. National Average is 3.9%.

Data Metric 8B – 5 of 9 (55.6%) HPV reporting indicator at majors with failed stack tests. National Average is 20.5%.

File Metric 8C – 13 of 16 (81.3%) accuracy of HPV determinations.

State response

IDEM's compliance and enforcement program is not limited to the discovery of HPV's to assure sources maintain compliance with the rules and permits. IDEM actively promotes compliance through a variety of activities and has seen compliance rates rise in Indiana. IDEM's identification of HPV's has remained consistent over the years. IDEM continues to identify violations through inspections, compliance reviews, stack tests and other compliance determinations. IDEM Compliance and Enforcement Managers also conduct a variety of outreach, and assistance activities to promote and increase compliance in addition to Compliance Monitoring Strategy Full and Partial Compliance Evaluations. Some of these activities to promote and increase compliance include:

- Conduct permit compliance assistance visits where compliance and enforcement managers meet with permittees to walk through their permit requirements
- Send compliance reminder letters (e.g. permit renewals)
- Identity potential issues or potential compliance problems during inspections
- Provide training to sources

- Development of guidance documents, checklists, fact sheets, training manuals
- Follow up calls and/or source visits when there is a violation
- Participate in commerce or sector based associations, professional association meetings or training
- Respond to telephone and email compliance inquiries
- Meetings with sources, consultants, attorneys, local officials etc. to discuss compliance related matters
- Respond to Compliance and Technical Assistance (CTAP) inquiries
- Assist in the development of CTAP's sector-based notebooks, guides, checklists, publications, and fact sheets
- Identify P2 opportunities during inspections
- Encourage sources' participation in the Environmental Stewardship Programs during inspections and other compliance opportunities
- Post compliance assistance tools on web
- Meet with sources at their request
- Meet with city and counties officials.
- Develop Air Non-Rule Policy Documents
- Conduct Environmental Results Programs

The specific sources or files in the Explanation were not listed or provided so IDEM cannot provide any further response.

Recommendation

- Solutions to issues 1, 2 and 3 in Explanation above regarding data entry will be resolved under Elements 2 and 3 of this report.
- If issues are not resolved through monthly conference calls, IDEM will propose a plan to address them, including specific actions to address data gaps identified above and milestones for implementation.
- Progress will be monitored by Region 5 through monthly conference calls and steps will be taken as necessary to review implementation of recommended actions.

Element 9 — Enforcement Actions Promote Return to Compliance: Enforcement actions include required corrective action that will return facilities to compliance in specified timeframe.

Finding	Meets Expectations
Description	Thirteen of 13 reviewed formal enforcement responses (100.0%) included required corrective actions that will return the source to compliance in a specified time frame.
Explanation	No performance deficiencies were identified by the Region.
Relevant metrics	File Metric $9A - 13$ of 13 (100.0%) formal enforcement return facilities to compliance.
State response	IDEM appreciates EPA's recognition of our efforts to return sources to compliance.
Recommendation	No action needed.

Element 10 — Timely and Appropriate Action: Timely and appropriate enforcement action in accordance with policy relating to specific media.

Finding	Area	for	State	Improvement
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Description Four of 8 reviewed HPV addressing actions (50.0%) met the timeliness

standard in the HPV Policy. Seven of 7 reviewed HPVs (100.0%)

demonstrated the violation was appropriately addressed.

Explanation Three HPV addressing actions were not addressed within 270 days of the

Day Zero Date achieved. 1) 1 year, 4 months; 2) 294 days; 3) 342 days and

4) 291 days.

A similar finding was noted in IDEM's Round 1 SRF report and remains

an issue.

Relevant metrics Data Metric 10A – 13 of 25 (52.0%) HPV cases which meet the timeliness

goal of HPV Policy. National Average is 63.7%.

File Metric 10A – 4 of 8 (50.0%) timely action taken to address HPVs. File Metric 10B – 8 of 8 (100.0%) appropriate enforcement responses for

HPVs.

IDEM continues to work with EPA Region 5 to address the timeliness and State response

> actions involving complex HPV cases. The number of state lead cases on the Watch List has decreased over the years and currently only 4 sources remain on the list. The specific sources or files in the Explanation were not

provided so IDEM cannot provide any further response.

Recommendation

By 60 days of the final report, EPA and IDEM will discuss options for improving ability to meet timeliness goals. Solutions determined during these discussions will be implemented by a date

agreed upon by both parties.

Progress will be monitored by Region 5 though monthly calls and steps will be taken as necessary to review implementation of

recommended actions.

Element 11 — Penalty Calculation Method: Documentation of gravity and economic benefit in initial penalty calculations using BEN model or other method to produce results consistent with national policy and guidance.

Finding	Area	for	State	Improvement
	2 M.A. W.E.E.	X U/ L	NEELES	RESERVE OF V CHERCHE

Description Six of 12 penalty calculations (50.0%) reviewed that consider and include,

where appropriate, gravity and economic benefit.

Explanation Five of the penalty calculations reviewed did not document economic

benefit consideration. One of the penalty calculations reviewed did not

document gravity consideration.

IDEM generally maintains effective penalty calculation records. The Region recommends that IDEM add a line item to its penalty calculation worksheet to ensure that economic benefit consideration is recorded for each penalty.

A similar finding was noted in IDEM's Round 1 SRF report and remains

an issue.

Relevant metrics File Metric 11A – 6 of 12 (50.0%) penalty calculations consider and

include gravity and economic benefit.

• IDEM believes the data metric results are higher than identified by EPA. The gravity portion of the penalty calculations is considered in every enforcement action, otherwise there would be no penalties. The exceptions would be cases that qualify for penalty mitigation under self-disclosure policies and inability to pay determinations. As examples, the gravity portion of the penalty along with economic benefit was considered in the Hendrickson Trailer 011-00037 case as was noted in the case documentation. Economic benefit was also included in the E&B Paving 057-05038 case and was noted in the case documentation at the time of EPA's review.

 The recommendation to update the penalty calculation worksheet is unnecessary since the penalty calculation sheet reviewed by EPA at the time of the SRF already included economic benefit on the sheet.

Recommendation By 60 days of the final

By 60 days of the final report, IDEM will update and submit to Region 5 a revised penalty calculation worksheet to be used and included in case files.

State response

Element 12 — Final Penalty Assessment and Collection: Differences between initial and final penalty and collection of final penalty documented in file.

Finding Area for State Attention

Description

Thirteen of 13 reviewed penalties (100.0%) documented the rationale for the final value assessed compared to the initial value assessed. Ten of 13 reviewed penalty files (83.3%) documented collection of penalty.

Explanation

Three files lacked documentation that the penalty had been collected. However, IDEM reported to AFS the dates penalties were collected and one file included documentation that the facility had begun the agreed upon Supplemental Environment Project.

This finding is only an Area for State Attention because the Region believes that IDEM can improve performance in this area on its own without a recommendation.

Relevant metrics

File Metric 12A - 13 of 13 (100%) documenting difference between initial and final penalty.

File Metric 12B – 10 of 13 (76.9%) penalties collected documentation.

State response

- This is an incorrect reflection of the penalties collected for closed cases. The penalties are tracked in IDEM's PeopleSoft Financial System and the Multimedia Enforcement Tracking System (METS) and reported to AFS. Three of the cases were still open because the sources still had some open Agreed Order compliance schedule items that still needed to be completed by the source. IDEM will not close a case until the source has complied with all terms and conditions of an Agreed Order including penalty payment. Penalty payments are verified by IDEM's Cashier's Office before closing cases and current IDEM files show that 2 of the 3 cases are still open. The documentation for the third case, Hendrickson Trailer (011-00037) shows payment being received and with a closeout letter.
- The AFS payment entry (Z8), in the case of payment plans, is only made when the final payment has been received and deposited. This is to prevent duplicate entries and possibly inflating payments received.

Recommendation

No action needed.

Resource Conservation and Recovery Act Findings

Element 1 — Data	Completeness: Completeness of Minimum Data Requirements.
Finding	Meets Expectations
Description	Review of the seventeen data metrics under Element 1 shows that all of the MDRs were complete.
Explanation	According to RCRAInfo, the following data metrics were complete: operating treatment, storage, and disposal facilities (TSDFs), active large quantity generators (LQGs), and active small quantity generators (SQGs) site universe counts; inspection counts; violation counts; informal enforcement action counts; SNC counts; formal enforcement action counts; total dollar amount of final penalties; and formal enforcement actions that include penalty for IDEM.
Relevant metrics	Data Metrics 1A1-5, 1B1-2, 1C1-2, 1D1-2, 1E1-2, 1F1-2, 1G, and 1H - no performance deficiencies were identified by the Region, see Data Metric Analysis table.
State response	State did not provide a comment.
Recommendation	No action needed.

Element 2 — Data Accuracy: Accuracy of Minimum Data Requirements.

Finding Area for State Attention

Description 142 sites in RCRAInfo were in violation for greater than 240 days without

being evaluated for re-designation as SNCs. Twenty-six of 30 files (86.7%)

contained data that was accurately reflected in RCRAInfo.

Explanation Four of the 30 files reviewed were inaccurately reflected in OTIS.

Examples of inaccuracies noted are: 1) in one file, two inspections were recorded in RCRAInfo as having occurred on the same day, while a subsequent follow-up inspection was not recorded in the database; 2) two files listed several more violations than entered in RCRAInfo; 3) in one file, a single inspection prompted by two separate causes was recorded as

two separate inspections RCRAInfo.

Also, with respect to the 142 sites in violation for greater than 240 days without subsequent SNC designation as of the time of the file review, IDEM reported that: (1) 35 had been updated after SRF data had been frozen; (2) 61 were subsequently corrected to reflect a return to compliance; (3) seven were EPA-lead enforcements; and (4) 29 of the sites were the subject of formal enforcement proceeding and/or had on-going remediation, closure or compliance activities to complete before the State could appropriate return the sites to compliance. Eleven of those 29 sites had been previously designated as SNCs.

This finding is only an Area of State Attention because the Region believes that IDEM can improve performance in this area on its own without a recommendation.

Relevant metrics Data Metric 2A – 142 sites in RCRAInfo have been in violation for

greater than 240 days without being evaluated for re-designation as SNCs. File Metric 2B - 26 of 30 files (86.7%) contained data that was accurately

reflected in RCRAInfo.

State response State did not provide a comment.

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Finding Meets Expectations

Description Thirty of 30 reviewed files (100%) demonstrated that mandatory data were

entered in RCRAInfo in a timely manner.

Explanation No performance deficiencies were identified by the Region.

Relevant metrics File Metric 3A – 30 of 30 files (100%) reviewed where mandatory data

are entered in RCRAInfo in a timely manner.

State response State did not provide a comment.

Element 4 — Completion of Commitments: Meeting all enforcement and compliance commitments made in state/EPA agreements.

Finding Meets Expectations

Description IDEM met five of six (83.3%) non-inspection commitments in the

Environmental Performance Partnership Agreement (EnPPA).

Explanation The one commitment that was not met during the EnPPA has been rolled

into the current EnPPA and is being completed as of the writing of this report. The migration of Indiana RCRA Activities Tracking System (IRATS) to the agency Environmental Information System (EIS) is currently scheduled to be worked on during the next EnPPA cycle from

June 2012 to March 2013.

Relevant metrics File Metric 4A – 5 of 6 (83.3%) non-inspection commitments met

File Metric 4B – IDEM does not have an alternative CMS.

State response State did not provide a comment.

Element 5 — Inspection Coverage: Completion of planned inspections.

Finding Meets Expectations

Description In combination with Region 5, the national inspection goals for TSDFs (2

years) and LQGs (1 year and 5 year) were met.

Explanation IDEM conducted 17 of 18 inspections (94.4%) at Treatment, Storage, and

Disposal Facilities (TSDFs) with operating permits. The one facility not inspected by IDEM is a state-owned facility. IDEM does not inspect that facility because Region 5 elects to inspect that facility on an annual basis. IDEM is consistently above 20% inspection coverage each year for Large Quantity Generators (LQGs). The five year average is affected by the changing universe, therefore EPA considers this metric met. The LQG universe of total facilities in Indiana increased by approximately 15% in the past five years. In FY07, IDEM had 427 LQGs reporting to the RCRA Biennial Report on hazardous waste generating facilities. In FY11, IDEM had 503 LQGs reporting. Factoring in the change in the LQG universe, IDEM achieved the national goal to inspect 100% of LQGs every 5 years.

IDEM conducts additional CEI inspections of non-government TSDF's with operating permits each year. IDEM focuses the additional inspections on commercial TSDF's which handle the largest volume of hazardous waste. IDEM conducted a total of 45 inspections at non-government TSDF's during the two (2) year review period.

Relevant metrics Data Metric 5A – 17 of 18 (94.4%) two-year inspection coverage for

operating TSDFs. National goal 100%. National Average 89.4%.

Data Metric 5B – 29.4% annual inspection coverage for LQGs. National

goal 20%. National Average 22.6%.

Data Metric 5C – 85.6% five-year inspection coverage for LQGs.

National goal 100%. National Average 62.9%

State response State did not provide a comment.

Element 6 — Quality of Inspection Reports: Proper and accurate documentation of observations and timely report completion.

Finding	Meets Expectations
Description	Twenty-nine of the 30 files contained at least one inspection report. In all of these cases, the inspection reports were completed in a timely fashion. There were 34 inspection reports in total (four files contained more than one report). Thirty-two of 34 reviewed inspection reports (94.1%) were considered complete, and provided sufficient documentation to determine compliance at the facility.
Explanation	Two of the 34 inspection reports reviewed were incomplete or did not provide sufficient information to determine compliance for the following reasons: 1) lacks specific information regarding one violation and 2) one report could not be located.
Relevant metrics	File Metric 6A – 32 of 34 inspection reports (94.1%) complete and sufficient to determine compliance. File Metric 6B – 29 of 29 inspection reports (100%) completed in a timely manner.
State response	State did not provide a comment.
Recommendation	No action needed.

Element 7 — Identification of Alleged Violations: Compliance determinations accurately made and promptly reported in national database based on inspection reports and other compliance monitoring information.

Finding Meets Expectations

Description Twenty-nine of 29 reviewed inspection files (100%) led to accurate

compliance determinations. IDEM's violation identification rate is 41.8%

according to OTIS.

Explanation IDEM has accurate compliance determinations.

Relevant metrics File Metric 7A – 29 of 29 (100%) accurate compliance determinations.

Data Metric 7B – 41.8% of sites with violations found during inspection.

National average is 32.5%.

State response State did not provide a comment.

Element 8 — Identification of SNC and HPV: Accurate identification of significant noncompliance and high-priority violations, and timely entry into the national database.

Finding Meets Expectations

Description IDEM's SNC identification rate is 4.1%, which is higher than national

average of 2.1%. Nineteen of 19 reviewed files (100%) demonstrated significant noncompliance (SNC) status was appropriately determined. According to OTIS, IDEM is 100% for timeliness of SNC determinations.

Explanation IDEM has accurate and timely SNC determinations.

Relevant metrics Data Metric 8A – 21 of 517 (4.1%) SNC identification rate. National

Average is 2.1%.

Data Metric 8B – 100% of SNC determinations made in a timely manner.

National goal is 100%. National Average is 81.7%.

File Metric 8C – 19 of 19 files (100%) reviewed with appropriate SNC

determinations.

State response State did not provide a comment.

Element 9 — Enforcement Actions Promote Return to Compliance: Enforcement actions include required corrective action that will return facilities to compliance in specified timeframe.

Finding	Area	for	State	Attention
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Description Ten of 10 reviewed enforcement responses (100%) returned or will return a

site in SNC to compliance. Eight of nine reviewed enforcement responses (88.9%) returned or will return a secondary violator (SV) to compliance.

Explanation One violation involved failure to make a waste determination on 18 55-

gallon containers of soil/ground water. There was no detail in report on what was inadequate. Also, the facility responded by saying it disposed of the waste. There was no information in file to demonstrate that the

determination was appropriately made.

EPA would typically classify a violator who failed to make a waste determination as SNC. However, in this case, there was a lack of information in the file regarding details of the inadequacy to make that determination. This deficiency has been reflected in the results of metrics 6A and 9B, regarding inspection report detail and return to compliance.

This finding is only an Area of State Attention because the Region believes that IDEM can improve performance in this area on its own without a recommendation. Region 5 will monitor progress in the future.

Relevant metrics File Metric 9A – 10 of 10 (100%) enforcement that returns SNC sites to

compliance.

File Metric 9B – 8 of 9 (88.9%) enforcement that returns SV sites to

compliance.

State response State did not provide a comment.

Element 10 — Timely and Appropriate Action: Timely and appropriate enforcement action in accordance with policy relating to specific media.

Finding Meets Expectations

Description Seventeen of 17 reviewed SNC designations (100%) were addressed in a

timely manner, according to OTIS. Nineteen of 19 reviewed files (100%)

demonstrated enforcement responses appropriate to the violations.

Explanation IDEM has timely and appropriate enforcement responses.

Relevant metrics Data Metric 10A – 17 of 17 (100%) timely enforcement taken to address

SNC. National Goal is 80%. National Average is 81.8%.

File Metric 10B – 19 of 19 (100%) appropriate enforcement taken to

address violations.

State response State did not provide a comment.

Element 11 — Penalty Calculation Method: Documentation of gravity and economic benefit in initial penalty calculations using BEN model or other method to produce results consistent with national policy and guidance.

Finding Meets Expectations

Description Twelve of 12 reviewed penalty calculations (100%) considered and

included, where appropriate, gravity and economic benefit.

Explanation IDEM considers and includes gravity and economic benefit into its penalty

calculations.

Relevant metrics Files Metric 11A – 12 of 12 (100%) penalty calculations include gravity

and economic benefit.

State response State did not provide a comment.

Element 12 — Final Penalty Assessment and Collection: Differences between initial and final penalty and collection of final penalty documented in file.

Finding Meets Expectations Description Eleven of 12 reviewed penalties (91.7%) documented the difference between the initial and final assessed penalty, and the rationale for that difference. Nine of nine reviewed files (100%) documented collection of penalty. **Explanation** Three penalties were reduced to zero due to demonstrated inability to pay. In one file, rationale regarding penalty adjustment was not clear from reading the narrative. Relevant metrics

File Metric 12A – 11 of 12 (91.7%) documentation on difference between

initial and final penalty.

File Metric 12B – 9 of 9 (100%) penalties collected.

State response State did not provide a comment.

Appendix A: Data Metric Analysis

Attached below are the results of the SRF data metric analyses. All data metrics are analyzed prior to the on-site file review. This provides reviewers with essential advance knowledge of potential problems. It also guides the file selection process as these potential problems highlight areas for supplemental file review.

The initial findings are preliminary observations. They are used as a basis for further investigation during the file review and through dialogue with the state. Where applicable, this analysis evaluates state performance against the national goal and average. Final findings are developed only after evaluating the data alongside file review results and details from conversations with the state. Through this process, initial findings may be confirmed or modified. Final findings are presented in Section III of this report.

Clean Water Act

Metric	Metric Name	Metric Type	Agency	Natl Goal	Natl Avg	Indiana	Count	Universe	Not Cntd	Initial Findings	Explanation
lal	Number of Active NPDES Majors with Individual Permits	Data Verification	State			192					
			EPA			0					
1a2	Number of Active NPDES Majors with General Permits	Data Verification	State			0					
			EPA			0					
1a3	Number of Active NPDES Non- Majors with Individual Permits	Data Verification	State			1407					
			EPA			0					
1a4	Number of Active NPDES Non- Majors with General Permits	Data Verification	State			0				Supplemental Review	EPA expects IDEM to input source inspections or enforcement actions
			EPA			0					

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Metric	Metric Name	Metric Type	Agency	Natl Goal	Avg	Indiana	Count	Universe		Initial Findings	Explanation
161	Permit Limits Rate for Major Facilities	Goal	State	>= 95%	98.60%	100%	192	192	0	Meets Expectations	
			EPA	>= 95%	98.80%	0/0	0	0	0		
1b2	DMR Entry Rate for Major Facilities.	Goal	State	>= 95%	96.50%	92.40%	13209	14290	1081	Meets Expectations	
			EPA	>= 95%	98.40%	0/0	0	0	0		
1b3	Number of Major Facilities with a Manual Override of RNC/SNC to a Compliant Status	Data Verification	State			3					
			EPA			0					
1c1	Permit Limits Rate for Non-Major Facilities	Informational only	State		66.10%	99%	1393	1407	14		
			EPA		87.50%	0/0	0	0	0		
1c2	DMR Entry Rate for Non-Major Facilities.	Informational only	State		72.60%	99.70%	22059	22118	59		
			EPA		87.20%	0/0	0	0	0		
lel	Facilities with Informal Actions	Data Verification	State			360					
			EPA			1					
1e2	Total Number of Informal Actions at CWA NPDES Facilities	Data Verification	State			442					
			EPA			1					
1f1	Facilities with Formal Actions	Data Verification	State			55					
			EPA			4					
1f2	Total Number of Formal Actions at CWA NPDES Facilities	Data Verification	State			56					

Metric	Metric Name	Metric Type	Agency	Natl Goal	Natl Avg	Indiana	Count	Universe	Not Cntd	Initial Findings	Explanation
			EPA			3					
lg1	Number of Enforcement Actions with Penalties	Data Verification	State			33					
			EPA			1					
1g2	Total Penalties Assessed	Data Verification	State			\$100,891					
			EPA			\$420,000					
2a1	Number of formal enforcement actions, taken against major facilities, with enforcement violation type codes entered.	Data Verification	State	95%		0				Supplemental Review	EPA expects to see actions linked to violations.
			EPA			0					
5a1	Inspection Coverage - NPDES Majors	Goal metric	State	100% state's CMS Plan commitment	54.40%	59.40%	114	192	78	Meets Expectations	
			EPA		3.80%	2.10%	4	192	188		
5b1	Inspection Coverage - NPDES Non-Majors	Goal metric	State	100% state's CMS Plan commitment	23.70%	58%	816	1407		Meets Expectations	
			EPA		0.80%	0.40%	5	1407	1402		
5b2	Inspection Coverage - NPDES Non-Majors with General Permits	Goal metric	State	100% state's CMS Plan commitment	19.20%	0/0	0	0	0	Area for State Improvement	EPA expects CMS inspections to be recorded.
			EPA		1%	0/0	0	0	0		
7a1	Number of Major Facilities with Single Event Violations	Data Verification	State		170	6	v		0	Supplemental Review	Number is incorrect. EPA expects to see SEVs identified as required for majors.

					Natl				Not		
Metric	Metric Name	Metric Type	Agency	Natl Goal	Avg	Indiana	Count	Universe		Initial Findings	Explanation
7a2	Number of Non-Major Facilities with Single Event Violations	Informational only	State			18				Supplemental Review	Number is incorrect.
			EPA			2					
7b1	Compliance schedule violations	Data Verification	State			6					
			EPA			0					
7c1	Permit schedule violations	Data Verification	State			133				Supplemental Review	
			EPA			0					
7d1	Major Facilities in Noncompliance	Review Indicator	State		71.20%	66.10%	127	192	65		
			EPA		63%	0/0	0	0	0		
7fl	Non-Major Facilities in Category 1 Noncompliance	Data Verification	State			289					
			EPA			0					
7gl	Non-Major Facilities in Category 2 Noncompliance	Data Verification	State			435					
			EPA			3					
7h1	Non-Major Facilities in Noncompliance	Informational only	State			51.90%	730	1407	677		
			EPA			0/0	0	0	0		
8a1	Major Facilities in SNC	Review indicator metric	State			26					
			EPA			0					
8a2	Percent of Major Facilities in SNC	Review indicator metric	State		22.30%	13.20%	26	197	171		
			EPA		29.40%	0/0	0	0	0		

Metric	Metric Name	Metric Type	Agency	Natl Goal	Natl Avg	Indiana	Count	Universe	Not Cntd	Initial Findings	Explanation
10a1	Major facilities with Timely Action as Appropriate	Goal metric	State	98%		0%	0	11	11	Area for State Improvement	EPA expects to see timely action.
			EPA				0	0			

Clean Air Act

Metric	Metric Name	Metric Type	Agency	Natl Goal	Natl Avg	Indiana	Count	Universe	Not Cntd	Initial Findings	Explanation
lal	Number of Active Major Facilities (Tier I)	Data Verification	State			630					
			EPA			630					
1a2	Number of Active Synthetic Minors (Tier I)	Data Verification	State			543					
			EPA			543					
1a3	Number of Active NESHAP Part 61 Minors (Tier I)	Data Verification	State			11				Supplemental Review	Verify number with IDEM during file review.
			EPA			11					
1a4	Number of Active CMS Minors and Facilities with Unknown Classification (Not counted in metric 1a3) that are Federally- Reportable (Tier I)	Data Verification	State			16				Supplemental Review	Verify number with IDEM during file review.
			EPA			0					

				1							
Metric	Metric Name	Metric Type	Agency	Natl Goal	Natl Avg	Indiana	Count	Universe	Not	Initial Findings	Explanation
MICHIC	Number of Active HPV Minors and		Agency	Goai	Avg	muiana	Count	Chiverse	CIIII	mittai Findings	
	Facilities with Unknown										Verify number
	Classification (Not counted in metrics 1a3 or 1a4) that are										with IDEM during file
1a5	Federally-Reportable (Tier I)	Data Verification	State			2				Supplemental Review	review.
rus	reactury respondence (Tierr)	Bata vermeation	State					+		зарриненан келен	Teview.
			EPA			0					
	Number of Active Minors and										
	Facilities with Unknown										TT 10 1
	Classification Subject to a Formal Enforcement Action (Not counted										Verify number with IDEM
	in metrics 1a3, 1a4 or 1a5) that are										during file
1a6	Federally-Reportable (Tier II)	Data Verification	State			4				Supplemental Review	review.
			EPA			2					
	Number of Active Federally-										
	Reportable NSPS (40 C.F.R. Part	D . W				200					
161	60) Facilities	Data Verification	State			200					
			EPA			200					
	Number of Active Federally-										
	Reportable NESHAP (40 C.F.R.										
1b2	Part 61) Facilities	Data Verification	State			40					
			EPA			40					
	Number of Active Federally-		EFA			40					
	Reportable MACT (40 C.F.R. Part										
1b3	63) Facilities	Data Verification	State			370					
			EPA			370					
			LIA			370		+			Number seems
											low. Verify
											number with
ļ., ,	Number of Active Federally-										IDEM during
1b4	Reportable Title V Facilities	Data Verification	State			604				Supplemental Review	file review.
			EPA			604					

				Natl	Natl				Not		
Metric	Metric Name	Metric Type	Agency	Goal	Avg	Indiana	Count	Universe	Cntd	Initial Findings	Explanation
	Number of Tier I Facilities with an										Number seems high. Verify number with IDEM during
1c1	FCE (Facility Count)	Data Verification	State			559				Supplemental Review	file review.
			EPA			0					
1c2	Number of FCEs at Tier I Facilities (Activity Count)	Data Verification	State			561					
			EPA			0					
1c3	Number of Tier II Facilities with FCE (Facility Count)	Data Verification	State			0					
			EPA			0					
1c4	Number of FCEs at Tier II Facilities (Activity Count)	Data Verification	State			0					
			EPA			0					
1d1	Number of Tier I Facilities with Noncompliance Identified (Facility Count)	Data Verification	State			192				Supplemental Review	Verify number with IDEM during file review.
			EPA			79					
1d2	Number of Tier II Facilities with Noncompliance Identified (Facility Count)	Data Verification	State			3				Supplemental Review	Verify number with IDEM during file review.
142	County	But verification	EPA			2				зарриненан течте	Teview.
lel	Number of Informal Enforcement Actions Issued to Tier I Facilities (Activity Count)	Data Verification	State			48					
	, , , , , , , , , , , , , , , , , , , ,										
			EPA			10					

				Natl	Natl				Not		
Metric	Metric Name	Metric Type	Agency	Goal	Avg	Indiana	Count	Universe	Cntd	Initial Findings	Explanation
1e2	Number of Tier I Facilities Subject to an Informal Enforcement Action (Facility Count)	Data Verification	State			45					
			EPA			10					
lfl	Number of HPVs Identified (Activity Count)	Data Verification	State			28					
			EPA			9					
1f2	Number of Facilities with an HPV Identified (Facility Count)	Data Verification	State			26					
			EPA			9					
lgl	Number of Formal Enforcement Actions Issued to Tier I Facilities (Activity Count)	Data Verification	State			48					
			EPA			11					
1g2	Number of Tier I Facilities Subject to a Formal Enforcement Action (Facility Count)	Data Verification	State			45					
			EPA			10					
1g3	Number of Formal Enforcement Actions Issued to Tier II Facilities (Activity Count)	Data Verification	State			4					
			EPA			0					
lg4	Number of Tier II Facilities Subject to a Formal Enforcement Action (Facility Count)	Data Verification	State			4					
			EPA			0			_		
lhl	Total Amount of Assessed Penalties	Data Verification	State			\$740,516					
			EPA			\$4,487,500					

				Natl	Natl				Not		
Metric	Metric Name	Metric Type	Agency	Goal	Avg	Indiana	Count	Universe		Initial Findings	Explanation
1h2	Number of Formal Enforcement Actions with an Assessed Penalty	Data Verification	State			46					
			EPA			7					
1i1	Number of Stack Tests with Passing Results	Data Verification	State			653					
			EPA			0					
1i2	Number of Stack Tests with Failing Results	Data Verification	State			18					
			EPA			0					
1i3	Number of Stack Tests with Pending Results	Data Verification	State			0					
			EPA			0					
1i4	Number of Stack Tests with No Results Reported	Data Verification	State			0					
			EPA			0					
1i5	Number of Stack Tests Observed & Reviewed	Data Verification	State			284					
			EPA			0					
1i6	Number of Stack Tests Reviewed Only	Data Verification	State			387					
			EPA			0					
l j	Number of Title V Annual Compliance Certifications Reviewed	Data Verification	State			607					
<u>-,</u>		Zaar vermouton	EPA			1					
2a	Major Sources Missing CMS Source Category Code	Review Indicator	State			4					
			EPA			4					

				Natl	Natl				Not		
Metric	Metric Name	Metric Type	Agency	Goal	Avg	Indiana	Count	Universe	Cntd	Initial Findings	Explanation
	Timely Entry of HPV										
3al	Determinations	Review Indicator	State	<60 days		8					
			EPA			2					
3a2	Untimely Entry of HPV Determinations	Goal	State	<60 days		20				Area for State Improvement	EPA expects timely entry of HPVs per HPV Policy.
			EPA	0		7					
	Timely Reporting of Compliance Monitoring Minimum Data										
3b1	Requirements	Goal	State	100%	78.60%	91.40%	1068	1168	100	Meets Expectations	
			EPA	100%	73.40%	0%	0	1	1		
	Timely Reporting of Stack Test									Area for State	EPA expects timely entry of
3b2	Minimum Data Requirements	Goal	State	100%	75.50%	39.80%	267	671	404	Improvement	Stack Tests.
			EPA	100%	85.70%	0/0	0	0	0		
3b3	Timely Reporting of Enforcement Minimum Data Requirements	Goal	State	100%	76.10%	87.30%	89	102	13	Area for State Attention	
000	THE PART OF THE PA	3000							1.0	111111111111111111111111111111111111111	
			EPA	100%	68.60%	95.20%	20	21	1	Area for State	
5a	FCE Coverage Major	Goal	State	100%	90%	85.10%	343	403	60	Attention	
			EPA	100%	49.10%	0/0	0	0	0		
5b	FCE Coverage SM-80	Goal	State	100%	90.60%	86.40%	178	206	28	Area for State Attention	
	-		EPA	100%	0%	0/0	0	0	0		
5c	FCE Coverage Synthetic Minors (non SM-80)	Goal	State		66.70%	0/0	0	0	0	Meets Expectations	Not required to report.
			EPA	100%	0%	0/0	0	0	0		

				Natl	Natl				Not		
Metric	Metric Name	Metric Type	Agency	Goal	Avg	Indiana	Count	Universe	Cntd	Initial Findings	Explanation
5d	FCE Coverage Minors	Goal	State	100%	11.70%	0/0	0	0	0	Meets Expectations	Not required to report.
			EPA	100%	0%	0/0	0	0	0		
5e	Review of Title V Annual Compliance Certifications Completed	Goal	State	100%	72.50%	88.30%	534	605	71	Area for State Attention	
			EPA	100%	1%	0.20%	1	605	604		
7b1	Alleged Violations Reported Per Informal Enforcement Actions (Tier I only)	Goal	State	100%	62.20%	64.40%	29	45	16	Area for State Improvement	
			EPA	100%	52.60%	40%	4	10	6		
7b2	Alleged Violations Reported Per Failed Stack Tests	Review Indicator	State		54%	57.10%	8	14	6		
			EPA		0%	0/0	0	0	0		
7b3	Alleged Violations Reported Per HPV Identified	Goal	State	100%	69.60%	90%	18	20	2	Meets Expectations	
			EPA	100%	40.60%	71.40%	5	7	2		
8a	HPV Discovery Rate Per Major Facility Universe	Review Indicator	State		3.90%	3.20%	20	630	610		
			EPA		0.40%	1%	6	630	624		
8b	HPV Reporting Indicator at Majors with Failed Stack Tests	Review Indicator	State		20.50%	55.60%	5	9	4		
			EPA		0%	0/0	0	0	0		
10a	HPV cases which meet the timeliness goal of the HPV Policy	Review Indicator	State		63.70%	52%	13	25	12		
			EPA		48.60%	50%	1	2	1		

Resource Conservation and Recovery Act

Metric	Metric Name	Metric Type	Agency	Natl Goal	Natl Avg	Indiana	Count	Universe	Not Cntd	Initial Findings	Explanation
200000000000000000000000000000000000000		•		Goal	Aig		Count	emverse	Citta	Initial Findings	Explanation
lal	Number of operating TSDFs	Data Verification	State			18					
			EPA			18					
1a2	Number of active LQGs	Data Verification	State			487					
			EPA			487					
1a3	Number of active SQGs	Data Verification	State			1068					
			EPA			1068					
1a4	All other active sites	Data Verification	State			6361					
			EPA			6361					
1a5	Number of BR LQGs	Data Verification	State			487					
			EPA			487					
1b1	Number of sites inspected	Data Verification	State			491					
			EPA			30					
1b2	Number of inspections	Data Verification	State			516					
			EPA			31					
1c1	Number of sites with new violations during review year	Data Verification	State			205					
			EPA			5					

				1					3.7		
Metric	Metric Name	Metric Type	Agency	Natl Goal	Natl Avg	Indiana	Count	Universe	Not Cntd	Initial Findings	Explanation
1c2	Number of sites in violation at any time during the review year regardless of determination date	Data Verification	State			376					
			EPA			88					
1d1	Number of sites with informal enforcement actions	Data Verification	State			192					
			EPA			5					
1d2	Number of informal enforcement actions	Data Verification	State			198					
			EPA			5					
lel	Number of sites with new SNC during year	Data Verification	State			21					
			EPA			1					
1e2	Number of sites in SNC regardless of determination date	Data Verification	State			37					
			EPA			3					
1f1	Number of sites with formal enforcement actions	Data Verification	State			41					
			EPA			1					
1f2	Number of formal enforcement actions	Data Verification	State			96					
			EPA			1					
1g	Total dollar amount of final penalties	Data Verification	State			\$291,609					
			EPA			\$0					

				Natl	Natl				Not		
Metric	Metric Name	Metric Type	Agency	Goal	Avg	Indiana	Count	Universe	Cntd	Initial Findings	Explanation
	Number of final formal actions with										
1h	penalty in last 1 FY	Data Verification	State			27					
			EPA			0					
2a	Long-standing secondary violators	Review Indicator	State			142				Supplemental Review	Number seems high. Verify number with IDEM during file review.
			EPA			74					
	Two-year inspection coverage for										The one facility not inspected by IDEM is a State-owned facility. IDEM does not inspect that facility because the U.S. EPA elects to inspect that facility on an
5a	operating TSDFs	Goal	State	100%	89.40%	94.40%	17	18	1	Meets Expectations	annual basis.
			Combined	100%	94.20%	100%	18	18	0		
5b	Annual inspection coverage for LQGs	Goal	State	20%	22.60%	29.40%	143	487	344	Meets Expectations	
			Combined	20%	24.70%	31.20%	152	487	335		
5c	Five-year inspection coverage for LOGs	Goal	State	100%	62.90%	85.60%	417	487	70	Meets Expectations	IDEM is consistently above 20% each year. 5year average is affected by changing universe.
			Combined	100%		87.70%	427	487	60	•	

				Natl	Natl				Not		
Metric	Metric Name	Metric Type	Agency	Goal	Avg	Indiana	Count	Universe		Initial Findings	Explanation
5d	Five-year inspection coverage for active SQGs	Informational Only	State		11%	55.50%	593	1068	475		
			Combined		11.60%	56.70%	606	1068	462		
5el	Five-year inspection coverage at other sites (CESQGs)	Informational Only	State			347					
			Combined			358					
5e2	Five-year inspection coverage at other sites (Transporters)	Informational Only	State			49					
			Combined			50					
5e3	Five-year inspection coverage at other sites (Non-notifiers)	Informational Only	State			0					
			Combined			0					
5e4	Five-year inspection coverage at other sites (not covered by metrics 5a-5e3)	Informational Only	State			351					
	,		Combined			360					
7b	Violations found during inspections	Review Indicator	State		32.50%	41.80%	204	488	284		
			EPA		33.20%	16.70%	5	30	25		
8a	SNC identification rate	Review Indicator	State		2.10%	4.10%	21	517	496		
			EPA		5.20%	2.80%	1	36	35		
8b	Timeliness of SNC determinations	Goal	State	100%	81.70%	100%	21	21	0	Meets Expectations	
			EPA	100%	72.20%	0%	0	1	1		
10a	Timely enforcement taken to address SNC	Review Indicator	State	80%	81.80%	100%	17	17	0	Meets Expectations	

Metric	Metric Name	Metric Type	Agency	Natl Goal	Nati Avg		Count	Universe	Not Cntd	Explanation
			EPA	80%	33.30%	0/0	0	0	0	
			EPA			0				

Appendix B: File Metric Analysis

This section presents file metric values with EPA's initial observations on program performance. Initial findings are developed by EPA at the conclusion of the file review. Initial findings are statements of fact about observed performance. They should indicate whether there is a potential issue and the nature of the issue. They are developed after comparing the data metrics to the file metrics and talking to the state. Final findings are presented above in the SRF Findings section. Because of limited sample size, statistical comparisons among programs or across states cannot be made.

CWA Metric #	Description	Numerator	Denominator	Metric Value	Goal	Initial Findings	Details
2b	Files reviewed where data are accurately reflected in the national data system: Percentage of files reviewed where data in the file are accurately reflected in the national data systems	25	39	64.1%	95%	State Improvement	
3a	Timeliness of mandatory data entered in the national data system	30	39	76.9%	100%	State Improvement	
4 a1	Pretreatment compliance inspections and audits	9	9	100.0%	100% of CMS goal	Meets Requirements	
4a2	Significant industrial user (SIU) inspections for SIUs discharging to non-authorized POTWs	78	70	111.4%	100% of CMS goal	Meets Requirements	
4a3	EPA and state oversight of SIU inspections by approved POTWs	9	9	100.0%	100% of CMS goal	Meets Requirements	
4a4	Major CSO inspections	0	0	100.0%	of CMS goal	Meets Requirements	No CSO inspection commitments. EnPPA commitment based on Review/Approve/Monitor compliance of LTCPs. 5 audits of Major dischargers.
4 a5	SSO inspections	0	0	100.0%	100% of CMS goal	Meets Requirements	SSOs evaluated as part of CEI inspection. No Quantitative provided
4a6	Phase I MS4 audits or inspections	0	0	100.0%	100% of	Meets Requirements	

CWA Metric #	Description	Numerator	Denominator	Metric Value	Goal	Initial Findings	Details
					CMS goal		
4 a7	Phase II MS4 audits or inspections	28	0	100%	100% of CMS goal	Meets Requirements	No Phase II MS4 commitment.
4a8	Industrial stormwater inspections	31	0	100%	100% of CMS goal	Meets Requirements	No Industrial Stormwater commitments.
4a9	Phase I and II stormwater construction inspections	230	0	100%	100% of CMS goal	Meets Requirements	No Phase I & II commitments
4a10	Inspections of large and medium NPDES- permitted CAFOs	166	127	130.7%	100% of CMS goal	Meets Requirements	
4 a11	Inspections of non-permitted CAFOs	358	354	101.1%	100% of CMS goal	Meets Requirements	
4b	Planned commitments completed: CWA compliance and enforcement commitments other than CMS commitments, including work products/commitments in PPAs, PPGs, grant agreements, MOAs, MOUs or other relevant agreements	8	9	88.9%	100%	State Attention	
6a	Inspection reports reviewed that provide sufficient documentation to determine compliance at the facility	36	38	94.7%	100%	Meets Requirements	
6b	Inspection reports completed within prescribed timeframe: Percentage of inspection reports reviewed that are timely	32	38	84.2%	100%	State Attention	
7e	Inspection reports reviewed that led to an accurate compliance determination	34	35	97.1%	100%	Meets Requirements	
8b	Single-event violation(s) accurately identified as SNC or non-SNC	0	26	0.0%	100%	State Improvement	

CWA Metric #	Description	Numerator	Denominator	Metric Value	Goal	Initial Findings	Details
8c	Percentage of SEVs Identified as SNC Reported Timely: Percentage of SEVs accurately identified as SNC that were reported timely	0	1	0.0%	100%	State Improvement	
9a	Percentage of enforcement responses that return or will return source in SNC to compliance	20	20	100.0%	100%	Meets Requirements	
10b	Enforcement responses reviewed that address SNC that are appropriate to the violations	10	11	90.9%	100%	Meets Requirements	
11a	Penalty calculations that include gravity and economic benefit: Percentage of penalty calculations reviewed that consider and include, where appropriate, gravity and economic benefit	14	15	93.5%	100%	Meets Requirements	
12a	Documentation on difference between initial and final penalty: Percentage of penalties reviewed that document the difference between the initial and final assessed penalty, and the rationale for that difference	15	15	100.0%	100%	Meets Requirements	
12b	Penalties collected: Percentage of penalty files reviewed that document collection of penalty	14	14	100.0%	100%	Meets Requirements	

CAA Metric #	CAA File Review Metric Description	Numerator	Denominator	Percentage	Goal	Initial Findings	Details
2b	Accurate MDR data in AFS: Percentage of files reviewed where MDR data are accurately reflected in AFS	18	36	50.0%	100%	State Improvement	
4a1	Planned evaluations completed: Title V Major FCEs	347	236	147.0%	100%	Meets Requirements	
4a2	Planned evaluations completed: SM-80 FCEs	173	35	494.3%	100%	Meets Requirements	

CAA /letric #	CAA File Review Metric Description	Numerator	Denominator	Percentage	Goal	Initial Findings	Details
4a3	Planned evaluations completed: Synthetic Minor FCEs	N/A	N/A	N/A	100%	Meets Requirements	
4a4	Planned evaluations completed: Other Minor FCEs	N/A	N/A	N/A	100%	Meets Requirements	
4a5	Planned evaluations completed: Title V Major PCEs	N/A	N/A	N/A	100%	Meets Requirements	
4a6	Planned evaluations completed: SM-80 PCEs	N/A	N/A	N/A	100%	Meets Requirements	
4a7	Planned evaluations completed: Synthetic Minor PCEs	N/A	N/A	N/A	100%	Meets Requirements	
4a8	Planned evaluations completed: Other Minor PCEs	N/A	N/A	N/A	100%	Meets Requirements	
4b	Planned commitments completed: CAA compliance and enforcement commitments other than CMS commitments	3	3	100.0%	100%	Meets Requirements	
6a	Documentation of FCE elements: Percentage of FCEs in the files reviewed that meet the definition of a FCE per the CMS policy	14	31	45.2%	100%	State Improvement	
6b	Compliance Monitoring Reports (CMRs) or facility files reviewed that provide sufficient documentation to determine compliance of the facility: Percentage of CMRs or facility files reviewed that provide sufficient documentation to determine facility compliance	28	31	90.3%	100%	Meets Requirements	
7a	Accuracy of compliance determinations: Percentage of CMRs or facility files reviewed that led to accurate compliance determinations	14	32	43.8%	100%	State Improvement	
8c	Accuracy of HPV determinations: Percentage of violations in files reviewed that were accurately determined to be HPVs	13	16	81.3%	100%	State Improvement	

CAA /letric #	CAA File Review Metric Description	Numerator	Denominator	Percentage	Goal	Initial Findings	Details
9a	Formal enforcement responses that include required corrective action that will return the facility to compliance in a specified time frame: Percentage of formal enforcement responses reviewed that include required corrective actions that will return the facility to compliance in a specified time frame	13	13	100.0%	100%	Meets Requirements	
10a	Timely action taken to address HPVs: Percentage of HPV addressing actions that meet the timeliness standard in the HPV Policy	4	8	50.0%	100%	State Improvement	
10b	Appropriate Enforcement Responses for HPVs: Percentage of enforcement responses for HPVs that appropriately address the violations	8	8	100.0%	100%	Meets Requirements	
11a	Penalty calculations reviewed that consider and include gravity and economic benefit: Percentage of penalty calculations reviewed that consider and include, where appropriate, gravity and economic benefit	6	12	50.0%	100%	State Improvement	
12a	Documentation on difference between initial and final penalty and rationale: Percentage of penalties reviewed that document the difference between the initial and final assessed penalty, and the rationale for that difference	13	13	100.0%	100%	Meets Requirements	
12b	Penalties collected: Percentage of penalty files reviewed that document collection of penalty	10	13	76.9%	100%	State Improvement	

RCRA Metric #	Name and Description	Numerator	Denominator	Metric %	Goal	Initial Findings	Details
2b	Accurate entry of mandatory data: Percentage of files reviewed where mandatory data are accurately reflected in the national data system	26	30	86.7%	100%	Area for Attention	
3a	Timely entry of mandatory data: Percentage of files reviewed where mandatory data are entered in the national data system in a timely manner	30	30	100.0%	100%	Meets Requirements	
4a	Planned non-inspection commitments completed: Percentage of non-inspection commitments completed in the review year	5	6	83.3%	100%	Meets Requirements	
4b1	Planned inspections completed: LQGs	n/a	n/a	n/a	n/a	n/a	
4b2	Planned inspections completed: SQGs	n/a	n/a	n/a	n/a	n/a	
4b3	Planned inspections completed: CESQGs	n/a	n/a	n/a	n/a	n/a	
4b4	Planned inspections completed: Transporters	n/a	n/a	n/a	n/a	n/a	
6a	Inspection reports complete and sufficient to determine compliance: Percentage of inspection reports reviewed that are complete and provide sufficient documentation to determine compliance	32	34	94.1%	N/A	Meets Requirements	
6b	Timeliness of inspection report completion: Percentage of inspection reports reviewed that are completed in a timely manner	29	29	100.0%	100%	Meets Requirements	
7a	Accurate compliance determinations: Percentage of inspection reports reviewed that led to accurate compliance determinations	29	29	100.0%	100%	Meets Requirements	

RCRA Metric #	Name and Description	Numerator	Denominator	Metric %	Goal	Initial Findings	Details
8c	Appropriate SNC determinations: Percentage of files reviewed in which significant noncompliance (SNC) status was appropriately determined during the review year	19	19	100.0%	100%	Meets Requirements	
9a	Enforcement that returns SNC sites to compliance: Percentage of enforcement responses that have returned or will return a site in SNC to compliance	10	10	100.0%	100%	Meets Requirements	
9b	Enforcement that returns SV sites to compliance: Percentage of enforcement responses that have returned or will return a secondary violator to compliance	8	9	88.9%	100%	Area for Attention	
10b	Appropriate enforcement taken to address violations: Percentage of files with enforcement responses that are appropriate to the violations	19	19	100.0%	100%	Meets Requirements	
11a	Penalty calculations include gravity and economic benefit: Percentage of reviewed penalty calculations that consider and include, where appropriate, gravity and economic benefit	12	12	100.0%	100%	Meets Requirements	
12a	Documentation on difference between initial and final penalty: Percentage of penalties reviewed that document the difference between the initial and final assessed penalty, and the rationale for that difference	11	12	91.7%	100%	Meets Requirements	
12b	Penalties collected: Percentage of files that document collection of penalty	9	9	100.0%	100%	Meets Requirements	

Appendix C: File Selection

Files are selected according to a standard protocol using a web-based file selection tool. These are designed to provide consistency and transparency to the process. Based on the description of the file selection process below, states should be able to recreate the results in the table.

Clean Water Act

File Selection Process

Region 5 followed the SRF Round 3 File Selection Protocol. The universe of CWA files (inspections, enforcement actions, and violations reported — occurring during the year reviewed) from which to pick was 1308. Per the Protocol, the range of files selected for a universe that size is 35 to 40. As a result, Region 5 picked 40 files to use for its random, representative file selection which included 3 CAFO files and 3 SSO files resulting from IDEM's Appendix C.CMS Table. These files are an assortment of the following categories and are geographically distributed across the state:

acca	deress the state.
	Majors or Minors
	Inspections or no inspections
	SNCs or no SNCs
	Informal or formal actions
	Different permit types
	Violation and no violations
	Penalties or no penalties
	Geographic location

File Selection Table

ID Number	Facility Name	Universe	Permit Components	Inspections	Violation	SEV	SNC	Informal Actions	Formal Actions	Pen	alties	Selection
	ADVANCE											
	WWTP, TOWN	Non-										
IN0039705	OF	Major	POTW	1	Yes	1	No	0	0	\$	-	R
	ASPHALT	Non-										
IN0050661	MATERIALS INC	Major		2	Yes	4	No	0	0	\$	-	R
	ATTICA	Non-										
IN0020222	MUNICIPAL	Major	CSO, POTW	1	Yes	0	No	2	0	\$	-	R

			Permit					Informal	Formal		
ID Number	Facility Name	Universe	Components	Inspections	Violation	SEV	SNC	Actions	Actions	Penalties	Selection
	WWTP										
	BLUE RIVER										
	VALLEY JR-SR	Non-				_	l	_			_
IN0031399	HS	Major		2	Yes	0	No	2	1	\$ -	R
1510000455	Des Deis Cite 4	Non-	0.450						_		
ING806155	Bos Dairy Site 4	Major	CAFO	1	Yes				1	\$ 2,000.00	R
		l	CSO, POTW,			_		_	_		_
IN0022462	BUTLER WWTP	Major	Pretreatment	0	Yes	0	SNC	0	0	\$ -	R
	0001111114						Cate				
IN0047473	CORUNNA WWTP	Non-	POTW	1	Yes	0	gory 1	1	0	·	R
INUU47473	DANA LIGHT	Major	POTW	1	Yes	U	1	1	U	\$ -	K
	AXLE										
	PRODUCTS.										
IN0000388	LLC	Major		1	Yes	0	No	2	1	\$ 4,950.00	R
	DEAN H	iviajo:					110	_		+ 1,000.00	, ,
	MITCHELL GEN										
IN0000124	STATION	Major		1	No	0	No	О .	0	\$ -	R
	DELPHI										
	MUNICIPAL		Biosolids,								
IN0021377	WWTP	Major	POTW	1	Yes	0	SNC	2	1	\$ -	R
	EAST CHICAGO		Biosolids,								
	SANITARY	l	CSO, POTW,			_					_
IN0022829	DISTRICT	Major	Pretreatment	1	Yes	0	SNC	3	1	\$ 13,125.00	R
	FORT WAYNE		Biosolids,								
IN0032191	FORT WAYNE	Maior	CSO, POTW, Pretreatment	0	No No	0	No	0	1	\$ 11,250.00	R
1110032191	HAZLETON	Major	Pretieatment	0	INO	U	Cate	0	1	\$ 11,∠50.00	K
	WATER	Non-									
IN0060143	DEPARTMENT	Major		1	Yes	0	gory 1	1	0	\$ -	R
	HUNTINGBURG	illajoi		-	100		<u>'</u>	 		<u> </u>	- '`
	MUNICIPAL	Non-									
IN0003093	WATER UTILITY	Major		1	No	0	No	0	0	\$ -	R
	INDIANAPOLIS	<u> </u>									
	BELMONT AND		Biosolids,								
	SOUTHPORT		CSO, POTW,								
IN0023183	ADVNCD WTP	Major	Pretreatment	0	Yes	2	No	1	2	\$ -	R

			Permit					Informal	Formal		
ID Number	Facility Name	Universe	Components	Inspections	Violation	SEV	SNC	Actions	Actions	Penalties	Selection
	JACKSON										
	COUNTY										
	REGIONAL	1									
1110050040	SEWER	Non-	DOTA		\ \ _{\\}	^	N			_	
IN0052949	DISTRICT	Major	POTW	1	Yes	0	No	0	0	\$ -	R
İ	JUPITER COIL COATING	Non									
IN0061735	DIVISION	Non- Major		0	Yes	0	No	0	1	\$ 12.500.00	R
1110001735	DIVISION	iviajoi		0	res	- 0	Cate	· ·	1	\$ 12,500.00	, R
ĺ	KANKAKEE	Non-									
IN0031275	REST AREA	Major		0	Yes	0	gory 1	0	0	\$ -	R
FarmID:663	INLOT ANLA	Non-			165		1	<u> </u>		Ψ -	i i
7	Kolish Farms	Major	CAFO	1	Yes				1	\$ -	R
,	LEN DEL	Iviajor	0711 0	'	103		Cate		•	Ψ	- · · ·
	MOBILE HOME	Non-					gory				
IN0051870	PARK	Major		1	Yes	0	1	l 1	1	\$ 2.500.00	R
	MICHIGAN CITY		Biosolids,							. ,	
	- J. B. GIFFORD		CSO, POTW,								
IN0023752	WWTP	Major	Pretreatment	1	Yes	3	No	1	0	\$ -	R
	NEW PEKIN										
	WASTEWATER										
	TREATMENT	Non-									
IN0021059	PLANT	Major	POTW	1	No	0	No	0	0	\$ -	R
•	OXFORD						Cate				
	MUNICIPAL	Non-					gory				
IN0021342	WWTP	Major	CSO, POTW	1	Yes	0	1	1	1	\$ -	R
l	PARAGON	Non-									_
IN0040479	WWTP	Major	POTW	1	No	0	No	1	1	\$ 500.00	R
	PINEVIEW	1					Cate				
111005000	LODGE & GOLF	Non-			,		gory				
IN0050326	COURSE	Major		1	Yes	0	1	1	0	\$ -	R
	PLAINFIELD										
IN0062456	SOUTH WWTP,	Major		4	Yes	0	No	0	0	_ e	R
1110002456	PRO TECH	Major		1	res	- 0	No Cate	0	0	\$ -	H R
	METAL	Non-					l .				
INP000270	FINISHING, INC.	Major		0	Yes	0	gory 1	l o	0	\$ -	R
1141-000270	T INISTING, INC.	iviajui			162	U	<u> </u>			<u></u> -	<u> </u>

			Permit					Informal	Formal		
ID Number	Facility Name	Universe	Components	Inspections	Violation	SEV	SNC	Actions	Actions	Penalties	Selection
FarmID:485		Non-									
9	Richard Arvin	Major	CAFO		Yes				1	\$ 2,000.00	R
	RICHMOND						Cate				
	MOBILE HOME	Non-					gory				
IN0045667	PARK	Major		1	Yes	0	1	1	1	\$ 1,700.00	R
			Biosolids,								
	SEYMOUR		CSO, POTW,				l		_		_
IN0024473	WWTP, CITY OF	Major	Pretreatment	0	Yes	0	No	1	0	\$ -	R
		l					Cate				
	SPRING CREEK	Non-					gory	,			_
IN0057151	TRAVEL PLAZA	Major		1	Yes	0	1	1	1	\$ 1,100.00	R
	SPRING MILL						Cate				
	STATE PARK	Non-					gory			_	_
IN0030236	WWTP	Major		2	Yes	0	1	1	0	\$ -	R
	0)4/4)/755	N					Cate				
IN0037001	SWAYZEE WWTP	Non-	OCC DOTAL		\ \ _{\\}	0	gory	ا ہا		_	R
1110037001		Major	CSO, POTW	1	Yes	<u> </u>	1	1	0	\$ -	l R
	THYSSENKRUP P WAUPACA	Non									
IN0059251	INC PLT 5	Non-		1	Yes	0	No	0	0	\$ -	R
1110059251	TIMBERBROOK	Major		<u> </u>	168	0	INO	0	0	\$ -	R
	MOBILE HOME	Non-									
IN0033065	PARK	Maior		1	Yes	0	No	o	0	\$ -	R
1140033003	TOWN OF	iviajoi			163		Cate			Ψ -	1
	MONTEREY	Non-					gory				
IN0060852	WWTP	Major	POTW	1	Yes	0	9019	1	0	\$ -	R
1140000002	TWIN LAKES	iviajoi	10100	<u>'</u>	103		Cate	1		Ψ -	1
	MOBILE HOME	Non-					gory				
IN0044491	COURT	Major		2	Yes	0	1	1	0	\$ -	R
	WEST			 	. 55		<u>'</u>			7	† '`
	COLLEGE										
	CORNER										
	WWTP, TOWN	Non-									
IN0039411	OF	Major		1	Yes	0	No	0	0	\$ -	R
	WHITE OAKS										
	ON THE LAKE	Non-									
IN0054445	WWTP	Major		1	Yes	0	No	0	0	\$ -	R

ID Number	Facility Name	Universe	Permit Components	Inspections	Violation	SEV	SNC	Informal Actions	Formal Actions	Penalties	Selection
	WINSLOW										
	MUNICIPAL	Non-									
IN0040789	WWTP	Major	POTW	1	Yes	0	No	0	0	\$ -	R

Clean Air Act

File Selection Process

Region 5 followed the SRF Round 3 File Selection Protocol. The universe of CAA files (inspections, enforcement actions, and violations reported — occurring during the year reviewed) from which to pick was 712. Per the Protocol, the range of files selected for a universe that size is 30 to 35. As a result, Region 5 picked 35 files to use for its random, representative file selection. These files are an assortment of the following categories and are geographically distributed across the state:

шд	categories and are geographically distributed across the s
	Major sources and SM-80s
	Full and Partial Compliance Evaluations (FCEs/PCEs)
	Violations and no violations
	Stack tests
	Title V Annual Compliance Certification
	High Priority Violations (HPVs) and no HPVs
	Informal and formal actions
	Penalties and no penalties

File Selection Table

ID Number	Facility Name	County Code	Universe	Full Compliance	Stack Tests Failed	Violations	HPVs	Informal Actions	Formal Actions	Pe	nalties	Selection
	ADVANCED											
	BEARING											
1803100002	MATERIALS LLC	31	Synthetic Minor	1	0	0	0	1	1	\$	9,600.00	R
	ALCOA - WARRICK											
	POWER PLT, AGC											
1817300002	DIV OF AL	173	Major	1	2	1	0	0	0	\$	-	R
	ARCELORMITTAL											
1808900318	INDIANA HARBOR,	89	Major	2	0	2	0	0	0	\$	-	R

		County		Full	Stack Tests			Informal	Formal		
ID Number	Facility Name	Code	Universe	Compliance	Failed	Violations	HPVs	Actions	Actions	Penalties	Selection
	LLC										
1803300044	AUTOLINE INDUSTRIES INDIANA, LLC	33	Major	1	0	0	0	0	0	\$ -	R
1800100005	BUNGE NORTH AMERICA	1	Major	0	0	2	0	0	0	\$ -	R
1813500033	CARDINAL ETHANOL, LLC	135	Major	1	0	0	0	0	0	\$ -	R
1801703118	CENTRAL PAVING, INC.	17	Major	1	0	0	0	0	0	\$ -	R
1809700061	CITIZENS GAS AND COKE UTILITY	97	Major	1	0	2	0	0	0	\$ -	R
1814700047	CORN ISLAND SHIPYARD	147	Synthetic Minor	1	0	0	0	1	1	\$ 5,625.00	R
1805705038	E & B PAVING, INC.	57	Synthetic Minor	0	0	0	0	1	1	\$ 1,500.00	R
1803900274	ELKHART COUNTY LANDFILL	39	Major	1	0	0	0	0	0	\$ -	R
1809700589	ENERDEL, INC.	97	Synthetic Minor	1	0	0	0	1	1	\$ 2,400.00	R
1810700007	FRICTION PRODUCTS COMPANY, LLC	107	Major	0	0	1	0	1	1	\$ 50,875.00	R
1803900582	GENESIS PRODUCTS, INC HARDWOODS (PLAN	39	Tier I Minor	1	0	0	0	0	0	\$ -	R
1808300027	GOOD SAMARITAN HOSPITAL	83	Major	1	0	1	0	1	1	\$ 3,438.00	R
1801100037	HENDRICKSON TRAILER SUSPENSION SYSTEMS	11	Major	1	0	1	1	1	1	\$ 10,200.00	R
1812700091	HERR-VOSS STAMCO RCI	127	Tier I Minor	0	0	1	0	0	0	\$ -	R

ID Number	Facility Name	County	Universe	Full Compliance	Stack Tests Failed	Violations	HPVs	Informal Actions	Formal Actions	Penalties	Selection
	HOOSIER ENERGY			I							
1812500001	REC, INC FRANK E. RATT	125	Major	1	0	2	1	1	3	\$ 428,400.00	R
	KNAUF										
1814500001	INSULATION GMBH	145	Major	1	0	0	0	0	0	\$ -	R
1014300001	LINCOLN	143	iviajoi	1	0	0	-	0	-		IX
	FOODSERVICE										
1800300046	PRODUCTS, INC.	3	Major	1	0	0	0	0	0	\$ -	R
	MASTERBRAND										
	CABINETS, INC				_	_					
1803700015	CORPORATE I	37	Major	1	0	0	0	0	0	\$ -	R
1816700056	MENARD, INC.	167	Synthetic Minor	0	0	0	1	0	0	\$ -	R
	MERITOR HEAVY VEHICLE										
1806300046	SYSTEMS LLC	63	Synthetic Minor	1	0	1	0	1	1	\$ 2,400.00	R
1000300040	NEW ENERGY	03	Synthetic Willion	1	0		-	1	1	Ψ 2,400.00	IX.
	COMPANY OF										
1814100033	INDIANA, LP	141	Major	1	2	2	2	2	3	\$ 31,000.00	R
1816700001	NOVELIS	167	Major	1	0	1	0	1	1	\$ 13,125.00	R
	POLAR KING		_								
	INTERNATIONAL,										
1800300232	INC.	3	Major	1	0	0	0	0	0	\$ -	R
1808900177	PRAXAIR, INC.	89	Major	1	0	0	0	0	0	\$ -	R
	RED SPOT PAINT										
1816300018	& VARNISH COMPANY, INC.	163	Major	0	2	0	0	0	0	\$ -	R
1010300010	RIETH-RILEY	103	Iviajoi	0		0	-	0	0	Ψ -	IX
	CONSTRUCTION										
1809705319	co	97	Synthetic Minor	1	0	0	0	0	0	\$ -	R
	ROCHESTER										
	METAL PRODUCTS										
1804900002	CORPORATION	49	Major	0	0	1	1	1	1	\$ 10,000.00	R
	SCEPTER, INC.,										
1808300015		83	Synthetic Minor	_	_		1	_		s -	R
1808300015	BICKNELL OPERATIONS	83	Synthetic Minor	0	0	0	1	0	0	\$ -	

ID Number	Facility Name	County Code	Universe	Full Compliance	Stack Tests Failed	Violations	HPVs	Informal Actions	Formal Actions	Penalties	Selection
4000700050	SYNDICATE					•			_	•	
1806700053	SALES, INC.	67	Synthetic Minor	1	0	0	0	0	0	\$ -	R
	TALBERT										
	MANUFACTURING,										
1807300025	INC.	73	Major	1	0	0	0	0	0	\$ -	R
	THE KAY										
1802300021	COMPANY, INC.	23	Major	1	0	0	0	0	0	\$ -	R
	UNITED										
	TRANSPORTATION										
1808900469	GROUP	89	Synthetic Minor	1	0	0	0	0	0	\$ -	R

Resource Conservation and Recovery Act

File Selection Process

Region 5 followed the SRF Round 3 File Selection Protocol. The universe of RCRA files (inspections, enforcement actions, and violations reported — occurring during the year reviewed) from which to pick was 564. Per the Protocol, the range of files selected for a universe that size is 30 to 35. As a result, Region 5 picked 30 files to use for its random, representative file selection. These files are an assortment of the following categories and are geographically distributed across the state:

	Generator status	(LQG, SQG,	CESQG, Transp	orter and TSDF)
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- ☐ Violations and non-violations
- ☐ Evaluations
- □ SNCs
- ☐ Informal or formal actions
- Penalties or no penalties.

File Selection Table

ID Number	Facility Name	County Code	Universe	Inspections	Violations	SNC	Informal Actions	Formal Actions	Penalty	Selection
	ARCELORMITTAL									
IND003913423	BURNS HARBOR LLC	IN127	LQG	3	3	0	0	3	\$17,200.00	R
IND086782224	BIOMET INC	IN085	LQG	2	3	1	2	2	\$ 3,400.00	R

		County				ou o	Informal	Formal		
ID Number	Facility Name	Code	Universe	Inspections	Violations	SNC	Actions	Actions	Penalty	Selection
IND079573192	BUTLER UNIVERSITY	IN097	sqg	1	1	0	1	0	\$ -	R
INR000125252	DOC G KEYS & SON CONSTRUCTION INC	IN097	Other	0	0	0	0	2	\$ -	R
IND984873430	DOORS AND DRAWERS INC	IN039	SQG	1	0	0	0	0	\$ -	R
INR000014597	DSE INC DBA SCREEN TECH DESIGNS	IN005	SQG	1	0	0	0	0	\$ -	R
IND005240015	ELPACO COATINGS CORP	IN039	Other	0	0	0	0	2	\$ -	R
IND006418263	FIRESTONE INDUSTRIAL PRODUCTS	IN057	Other	1	0	0	0	0	\$ -	R
INR000018960	GARDNER TRANSPORT SVCS INC	IN013	Transporter	1	0	0	0	0	\$ -	R
INT190010405	HBR HEALTHCARE CO INC	IN177	CESQG	1	0	0	0	0	\$ -	R
INR000000919	HERITAGE TRANSPORT LLC	IN097	LQG Transporter	1	0	0	0	0	\$ -	R
IND061154092	HOBSON CLEANERS	IN067	CESQG	1	0	0	0	0	\$ -	R
IND006371330	JEFFBOAT LLC	IN019	LQG	0	0	0	1	3	\$21,400.00	R
INR000119479	KOUNTRY WOOD PRODUCTS	IN039	LQG	1	1	0	1	0	\$ -	R
IND006419022	LIFT A LOFT CORP	IN035	CESQG	1	9	1	1	1	\$ -	R
IND006374938	MIDWEST RUBBER PRODUCTS INC	IN051	SQG	1	4	0	1	0	\$ -	R
IND115305781	NF FRICTION COMPOSITES INC	IN017	SQG	0	0	0	0	5	\$25,118.00	R
IND077045680	NIAGRA LASALLE CORP	IN089	LQG	1	2	1	1	3	\$ 6,000.00	R
IND085616837	PARTS CLEANING TECHNOLOGIES LLC	IN097	LQG	0	0	1	1	3	\$11,300.00	R
INR000127647	RIVER WOODWORKING LLC	IN087	Other	0	0	0	0	2	\$12,400.00	R

ID Number	Facility Name	County Code	Universe	Inspections	Violations	SNC	Informal Actions	Formal Actions	Pena	ılty	Selection
IND000806836	ROLLS-ROYCE CORP	IN097	LQG	1	10	1	0	0	\$	_	R
IND006376362	SABIC INNOVATIVE PLASTICS MT. VERNON LLC	IN129	TSDF LQG	1	0	0	0	0	\$	_	R
INR000012583	SACO INDUSTRIES INC	IN089	LQG	1	1	0	1	0	\$	-	R
IND000807016	SIEMENS HEALTHCARE DIAGNOSTICS INC	IN039	LQG	1	0	0	0	0	\$	-	R
IND163838253	SRAGG BODY SHOP	IN045	SQG	1	0	0	0	0	\$	-	R
INR000012120	STEEL DYNAMICS INC - ENGINEERED BAR PR	IN063	LQG	1	0	0	1	6	\$14,4	475.00	R
IND982066920	STELLA JONES CORP	IN125	LQG	1	2	0	1	0	\$	-	R
INR000127274	VAN SENUS AUTO PARTS	IN089	Other	1	0	0	0	0	\$	-	R
IND020424396	WISE TECHNICAL MARKETING	IN043	LQG	2	5	0	1	0	\$	-	R
IND005249099	ZINN KITCHENS INC	IN015	SQG	1	3	0	1	0	\$	-	R

Appendix D: Status of Past SRF Recommendations

During the Round 1 SRF review of Indiana's compliance and enforcement programs, EPA Region 5 recommended actions to address issues found during the review. The following table contains all outstanding recommendations for Round 1. For a complete and up-to-date list of recommendations from Rounds 1, visit the <u>SRF website</u>.

Round	Status	Due Date	Media	E#	Element	Finding	Recommendation
IN - Round 1	Working	1/2/2012	CWA	E1	Inspection Universe	CAFO inspections not in ICIS-NPDES	Enter CAFO inspections into ICIS-NPDES
IN - Round 1	Working	1/2/2012	CWA	E4	SNC Accuracy	SEVs not reported	Report SEVs Consistent With Guidance

Appendix E: Program Overview

IDEM State Background Information State Review Framework September 25, 2012

Agency Structure

IDEM is primarily organized into five main offices: Air Quality, Land Quality, Water Quality, Compliance Support, and Chief of Staff. The Office of Compliance Support is broken down into the offices of: Planning and Assessment; Pollution Prevention and Technical Assistance; Training and Safety and four regional offices (Northern, Northwest, Southwest and Southeast). The Chief of Staff's Office includes Media Relations; Communication Services; Finance Division; Legal Counsel and Criminal Investigations; Human Resources; Business and Legislative Relations; and Agricultural Relations.

See Organizational Charts attached.

Compliance and Enforcement Program Structure

Each of the three program area offices of IDEM, Air, Land and Water, has staff dedicated to permit issuance, compliance, and enforcement. While each of the three program offices are organized differently, each administers the various aspects of these functions in a relatively similar fashion in order to achieve a high rate of compliance. The basic tenants of IDEM's compliance goals, as described in the ENPPA are:

- Use a variety of compliance tools to encourage regulated facilities to maintain and, where possible, exceed compliance with environmental laws (e.g., compliance assistance, compliance assurance, administrative/civil enforcement, and criminal prosecution).
- Utilize joint preplanning to coordinate priorities, maximize agency resources, avoid duplication of efforts, eliminate "surprises," and institutionalize communication.
- Manage for internal and/or external environmental results.

The formal enforcement process is conducted in accordance with IC 13-30-3. This process involves the issuance of a Notice of Violation and a Proposed Agreed Order. IC 13-30-3-3 requires IDEM to offer the alleged violator an opportunity to enter into an Agreed Order and allows for a minimum 60 day negotiation period. During the 60 day negotiation period, an Agreed Order may be entered into by both parties. The Agreed Order includes appropriate injunctive relief and generally includes the assessment of a civil penalty. The majority of enforcement referrals are resolved through an Agreed Order. If settlement cannot be reached, a unilateral Commissioner's Order may be issued anytime after the 60 days.

The Office of Enforcement was reorganized in November 2008 to place each of the media enforcement programs into the various media compliance programs (Office of Air Quality, Office of Land Quality, and Office of Water Quality). The reorganization was designed with three goals in mind. First, IDEM sought to coordinate the various compliance and enforcement tools to improve compliance in each of the media programs. Second, the reorganization aimed to

provide enforcement case management technical resources needed to resolve enforcement cases. Finally, the process was also designed to increase efficiencies by bringing enforcement case managers into the program areas.

The Indiana Attorney General represents IDEM when enforcement of violations is pursued through the administrative hearing process or civil court. Deputy Attorney General's (DAGs) are imbedded in IDEM and work on enforcement cases for all of the programs. The enforcement staff of each office may make a referral to the Attorney General to compel compliance for noncompliance with an effective order and must work closely with the DAGs during civil enforcement.

Roles and Responsibilities

IDEM's mission is to implement federal and state regulations to protect human health and the environment while allowing the environmentally sound operations of industrial, agricultural, commercial and government activities vital to a prosperous economy. Environmental protection in Indiana has come a long way since 1986, when the Indiana Department of Environmental Management (IDEM) was established. Since then, IDEM has grown to a staff of 900, and employs some of Indiana's most qualified engineers, scientists and environmental project managers specializing in air, land, pollution prevention and water quality issues. Our staff members work hard to provide quality environmental oversight and technical assistance in your community and around the state.

The joint priorities of EPA and the IDEM program offices are described on pages 8 and 9 of the 2011-2013 ENPPA. The roles and responsibilities of the three major program offices as well as the Office of Compliance Support are described in significant detail on pages 11 through 42 of the current ENPPA document.

The following is a description of the program structure within each Office:

Office of Air Quality

The Office of Air Quality, Air Compliance and Enforcement Branch is responsible for determining compliance of regulated sources of air emissions in the State of Indiana through inspection, compliance monitoring, testing, and records review. There are 3 sections of compliance and enforcement managers along with 4 regional offices, whose primary functions are determining compliance at major sources of air pollution, conducting inspections, responding to compliants, taking appropriate enforcement actions for noncompliance, providing compliance assistance to sources, and to provide input on permits and rules. The functions also include inspections, review, and enforcement at minor permitted sources, asbestos sources, and exempt sources subject to various air pollution control requirements. A fourth section, the Compliance Data Section is responsible for the review and approval of stack tests and review of continuous emissions and opacity monitors. Additionally, all sections coordinate and provide oversight of the air compliance and enforcement related activities at the 4 IDEM regional offices.

In February 2009, the Office of Air Quality (OAQ), Air Compliance and Enforcement Branch conducted a value stream mapping event using a Kaizen approach that resulted in an integrated

air compliance and enforcement process beginning July 1, 2009. The process combined the air inspection and compliance responsibilities with enforcement responsibilities. Inspectors are now known as Compliance and Enforcement Managers and are now responsible for both air compliance and enforcement activities.

Office of Land Quality

The RCRA Hazardous Waste program and the CWA Concentrated Animal Feeding program are managed within the Office of Land Quality, Compliance and Response Branch. There are five Sections within the Compliance and Response Branch. The Hazardous Waste Compliance Section is responsible for conducting compliance inspections at hazardous waste generators and Treatment, Storage, and Disposal Facilities (TSDF). The Confined Feeding Compliance Section is responsible for conducting compliance inspections at NPDES permitted Concentrated Animal Feeding Operations (CAFO's) (327 15-16) and at smaller animal feeding operations regulated under Indiana's Confined Feeding Rule (327 IAC 19). Both the Hazardous Waste Compliance Section and the Confined Feeding Compliance Section issue informal violation letters in response to secondary violations identified during inspections.

Inspection staff members are also located within IDEM's Regional Offices. Coverage areas for the Regional Offices are shown in the attached map. All compliance inspections conducted in either program by a Regional Office inspector is reviewed by the Regional Office management and then routed for technical review to the Section Chief for the Hazardous Waste Compliance Section or the Confined Feeding Compliance Section as appropriate. Regional Office inspectors also issue informal violation letters in response to secondary violations identified during inspections.

The Office of Land Quality, Compliance and Response Branch, also includes the Enforcement Section. This Section manages all formal enforcement actions (and some informal violation letters) for the Hazardous Waste program and Confined Feeding Program, as well as other program areas in the Office of Land Quality.

Inspections identifying violations which meet the criteria for formal enforcement are reviewed by the Section Chief (and Regional Office Deputy Director if appropriate) and forwarded via SharePoint workflow to the OLQ Assistant Commissioner, Compliance and Response Branch Chief, and the Enforcement Section Chief. Each of those three managers receives the enforcement referral concurrently. Once approved by all three, the referral is assigned to staff in the Enforcement Section and maintained in the SharePoint Enforcement Site library. The Enforcement Section staff develops the appropriate enforcement response, negotiates the appropriate resolution and tracks the case until it is closed.

For enforcement cases addressing spills to waters of the state resulting in a fish kill, enforcement staff members coordinate with the Indiana Department of Natural Resources to recover natural resource damages for lost fish.

Office of Water Quality

Enforcement and compliance activities within the OWQ are conducted by staff of three branches. The Compliance Branch has two sections consisting of Inspections and Compliance/Data. The Inspection Section conducts field inspections consisting of annual commitment inspections as well as additional inspections as they come up throughout the year, including complaint investigations. Inspection reports are now generated using the Digital Inspector 2 application, making for a more consistent work product. In addition to the inspectors conducting field inspections, there are also two operator assistance staff members who provide more detailed assistance to troubled wastewater treatment plants and do not do commitment inspections. The Compliance/Data Section is tasked primarily with non-field compliance tasks as well as the conducting of pretreatment compliance audits. One group within this section processes all of the NPDES DMRs by entering the data into ICIS, conducting quality assurance review, and assuring that they are entered into the Virtual File Cabinet. The other group reviews reported results for violations, manages the Significant Noncompliance (SNC) effort, sends Violation Letters, and refers cases for enforcement as necessary.

The Storm Water specialists are located in the Wetland Storm Water Section and Enforcement staff members are located in the Enforcement Section both sections are located in the Surface Water, Operations and Enforcement Branch. Storm Water specialists reviews applications, participates in pre-application and coordination meetings, reviews plans, issues permits/authorizations to perform work, conduct compliance inspections, and investigates complaints Construction Site Run-off, Industrial Storm Water, and Municipal Separate Storm Sewer Systems. The Enforcement staff conducts all of the administrative enforcement actions for the OWQ, including those involving violations of the Safe Drinking Water Act.

The third branch is the Permit Branch. Located in this Branch is the Municipal NPDES Section where CSO staff are positioned.

Local Agencies Included and Excluded From Review

The Office of Air Quality discontinued contracts and delegation with local agencies in February 2009 in the interest of providing efficient, consistent, and more streamlined services with respect to air quality. This brought air quality services under one roof, reducing duplication of governmental services and helping to ensure regulatory consistency for all 92 Indiana counties. IDEM continues to work with the remaining local agencies to address and resolve air quality concerns that may arise from time to time, but the local agencies have not been delegated any authority to implement the Clean Air Act program and are excluded from review under the State Review Framework.

In the water program, there is a Memorandum of Understanding with the Indiana Department of Natural Resources for the administration of the NPDES program for coal mines. IDEM issues the NPDES permits and manages the compliance data, while IDNR conducts inspections, compliance, and enforcement activities. The inspection reports for NPDES permitted coal facilities are entered into ICIS by the OWQ Compliance/Data staff.

Additionally, there are 47 communities in Indiana that have been delegated the responsibilities for administration of the pretreatment program. These communities maintain their own authorities and staff to write permits and conduct inspections at significant industrial users. IDEM compliance staff oversee these communities through periodic pretreatment audits.

No part of the Hazardous Waste or Confined Feeding programs is managed at the local government level. Local Planning Commissions or Counties may set zoning requirements in addition to the State rules.

Resources, Staffing and Training

The state program for hiring is fully automated and is available at http://www.in.gov/spd/2334.htm. The hiring process begins once a position is vacated.

Office of Air Quality

The following table provides the number of Full Time Equivalents (FTE) for the programs managed in the Air Compliance and Enforcement Branch. This includes the regional office compliance and enforcement managers.

	Central Office	Regional Offices	
Compliance and Enforcement Companies		Offices	
Compliance and Enforcement Supervisors	5		
Compliance and Enforcement Managers	20	16	
Compliance and Enforcement Resource Staff	2		
Compliance Data Staff (Stack Test Observers)	9		
Data Management Staff	1		
Administrative Staff	7		
Subtotal	44	16	
Total Compliance and Enforcement FTEs	60		

The Air Compliance and Enforcement Branch and the regional offices are essentially fully staffed. The Office of Air Quality is able to fill vacancies as they occur. The program was recently impacted by as many as 5 vacancies, but the branch and regional office were able to fill those positions and have been training the new staff. There are 2 vacant positions due to promotions and those positions are in the process of being filled. The Air Compliance and Enforcement Branch is able to continue to meet all Compliance Monitoring Strategy Requirements with current staff workloads.

Office of Land Quality

The following table provides the number of Full Time Equivalents (FTE) for the programs managed in the Compliance and Response Branch. This includes the Regional Office inspectors.

	Inspe	ction	Enforcement	Office of Legal Counsel
	Central Office	Regional Offices		
Hazardous	13	2	3.75	1.5

Waste				
Confined Feeding	8.5	2	1.75	1.5

The Office of Land Quality staff managing the Hazardous Waste and Confined Feeding programs is essentially fully staffed. Management has successfully filled any vacancies that have occurred to date.

Office of Water Quality

The following table provides the number of Full Time Equivalents (FTE) for OWQ compliance, inspection, data and enforcement programs. This includes the Regional Office inspectors.

	Central Office	Regional Offices
NPDES Inspections	7	7
Stormwater Inspections	5	2
Operator Assistance	2	0
Pretreatment Compliance Audits	1	0
Compliance Review	2	0
Data Management	9	0
Enforcement	6	0

There are three section chief level positions supervising the individuals in this grouping. Currently one data management staff position is vacant. The vacant position is expected to be filled in the near future. There are additional managers in the four regional offices supporting the field inspector positions.

Data Reporting Systems and Architecture

Office of Air Quality

The Air Compliance and Enforcement Branch uses 2 database systems to manage compliance and enforcement data. The Air Compliance and Enforcement System (ACES) manages the inspection, reporting, stack testing, CEMS and COMS, complaints, and targeting compliance information. The Multimedia Enforcement Tracking Systems (METS) is an agency database and manages the enforcement and High Priority Violation (HPV) data. METS is used by the each of the program areas (air, land, and water) to track enforcement actions.

All of the EPA minimum data requirements (MDRs) are tracked in ACES and METS along with additional state specific information.

The Air Compliance and Enforcement Branch uses various reports designed to extract the required information from ACES and METS to manually upload compliance and enforcement data to Air Facility System (AFS). Data is uploaded to AFS by batch reports and manually. Batch reports are uploaded from ACES to AFS for compliance related data. Enforcement and HPV data from METS is directly entered into AFS at this time.

A third data system is used to track complaints received by IDEM. The Air Compliance and Enforcement Branch currently uses ACES to track complaints and data is manually loaded to the agency data system, Tools for Environmental Management and Protection Organizations (TEMPO). TEMPO is long term agency project to integrate permits, compliance, enforcement, and complaints into one data system for air, land, and water. Currently, the Air Compliance and Enforcement Branch only provides complaint information to TEMPO, but does not actively use it to manage complaints. Future plans are the transfer and manage all of the air compliance and enforcement data into TEMPO within the next few years. At that time, a data flow will be established directly from TEMPO to AFS.

Office of Land Quality

The State of Indiana is a direct entry state into the EPA RCRAInfo data system for the Handler, Compliance Monitoring & Enforcement, Permitting, Corrective Action, Biennial report, and Financial Assurance modules.

Indiana is currently using a state developed Oracle based data system to track the information for all of the referenced modules with the exception of the Enforcement Section. This system is called IRATS – the Indiana RCRA Activity Tracking System. All of the MDRs are tracked in IRATS along with additional state specific information. The enforcement data is tracked in METS, which is a multi-media enforcement tracking database. Reports have been designed which extract the required information from IRATS and METS and this information is manually loaded into RCRAInfo. Plans are in process to translate all of the RCRA data into IDEM's agency wide data system called Tools for Environmental Management and Protection Organizations (TEMPO) within the next few years. At that time a data flow will be established directly from TEMPO to RCRAInfo.

Office of Water Quality

OWQ enters NPDES permits, compliance and enforcement data directly into ICIS. As required by the ENPPA, IDEM reports to USEPA the necessary information as required and agreed upon, including required timelines. Much effort is put into populating national databases or to tracking performance against priority activities identified in the internal IDEM work plans. For several years IDEM has been adapting a comprehensive application (TEMPO) for use in several program areas, including the NPDES program. The long-term objective is to have TEMPO, ICIS, VFC and Digital Inspector work together and update each other.

Major State Priorities and Accomplishments

OFFICE OF AIR QUALITY Priorities:

The Air Compliance and Enforcement Branch's primary priorities are outlined in the 2011-2013 EnPPA. The main focus of the Air Compliance and Enforcement Branch is to implement the Compliance Monitoring Strategy plan for Title V and FESOP source compliance evaluations consistent with the September 2010 Clean Air Act Stationary Source Compliance Monitoring Strategy, respond to complaints, and implement a compliance and enforcement program for asbestos.

Accomplishments:

Improved Air Quality

In 2009, for the first time since air quality standards were developed in the 1970s, all Hoosiers were breathing air that met current health-based standards. This was a significant accomplishment, considering as recently as 2005, Indiana had 24 counties and townships in violation of the ozone standard and 17 counties and townships in violation of the annual standard for fine particulate matter.

Tightened Standards Lead to New Challenges

Since 2005, the EPA has set new ambient air quality standards for five criteria air pollutants: particulate matter, lead, nitrogen dioxide, sulfur dioxide and ozone. Current monitoring data indicates that all of Indiana meets the new particulate matter, nitrogen dioxide and ozone standards; however a small area does not meet the new lead standard and there will likely be areas that do not meet the new sulfur dioxide standard. Once areas not meeting the standard are identified, IDEM works to identify and control the sources of pollution causing the area to exceed the standard.

Unification of Compliance and Enforcement Functions

The Office of Enforcement was reorganized in November 2008 and placed in the compliance programs of the Office of Air Quality, Office of Land Quality and Office of Water Quality. The reorganization increased efficiency, communication and accountability within each of the compliance programs and created a more efficient process to address and resolve noncompliance.

In February 2009, the Office of Air Quality (OAQ), Air Compliance and Enforcement Branch conducted a value stream mapping event using a Kaizen approach that resulted in an integrated air compliance and enforcement process beginning July 1, 2009. The process combined the air inspection and compliance responsibilities with enforcement responsibilities. Inspectors are now known as Compliance and Enforcement Managers and are now responsible for both air compliance and enforcement activities.

Compliance Monitoring Strategy

The Air Compliance and Enforcement Branch completed the FY 2012 Compliance Monitoring Strategy (CMS) and continues to conduct full compliance evaluations on Part 70 and FESOP sources beyond the requirements of the CMS. The branch is able to report CMS activities on a monthly basis exceeding the CMS exceeding the 60 day reporting standard. The Air Compliance and Enforcement Branch has responded to 571 complaints during the federal fiscal year 2012 (October 1, 2011 to September 30, 2012) including those complaints referred from EPA.

Compliance Assistance

In addition to conducting inspections, responding to complaints, approving stack tests and reviewing emissions monitors, IDEM offers compliance assistance. In 2008, the Air Compliance and Enforcement Branch implemented a program to help air-permitted facilities with their Title V permits, Federally Enforceable State Operation Permits (FESOPs), Minor Source Operating Permits (MSOPs), permit renewals and significant source permit modifications. The Air Compliance and Enforcement Branch offered to meet with sources, review permit requirements and discuss new air permit requirements. IDEM has sent 1493 letters offering the compliance assistance in the last 5 years with 226 sources taking advantage of the opportunity. The Compliance and Enforcement Branch continue to implement this program of providing on-site compliance assistance to permittees.

IDEM also provides assistance when new regulations go into effect or information has the potential to change a permit or compliance status. Some of the assistance activities have included a surface coating initiative, a foundry carbon monoxide permit limited liability initiative, mint farm permit applicability initiative, automotive refinishing outreach and training, secondary aluminum die cast outreach and verification of compliance, bakeries and the identification of VOC emissions from proof boxes, and the implementation of the new Outdoor Hydronic Rule.

Conclusion

The purpose of IDEM's Office of Air Quality is to assure that every Hoosier has healthy air to breathe. In order to meet this purpose, IDEM routinely samples Indiana's air quality, provides timely air permits to qualified applicants, and verifies compliance with applicable state and federal air pollution laws and regulations. IDEM strives to issue air permits that are protective of human health and the environment; create industry-specific rules that limit air emissions; and verify that businesses comply with their state permits. Additionally, IDEM works with regional partnerships and outreach initiatives to ensure that Hoosiers are better educated about air quality. The result of these efforts is that Indiana's air quality continues to improve. U.S. EPA has tightened air quality standards and will continue to do so in the future. IDEM will continue to work to reduce pollutant levels and keep Indiana's air healthy.

OFFICE OF LAND QUALITY

Accomplishments:

Improved Land Quality

Keeping our land healthy includes properly managing petroleum and chemical releases, as well as cleaning up contamination that may have occurred decades before regulations were adopted to protect the environment. Therefore, it's what we don't find that is a reflection of environmental quality. Looking back just a few decades, it was common to find mismanaged hazardous waste; pest-infested open garbage dumps near every urban area; large tire dumps in woodlands and streams; careless tire fires that contaminated air, land and water; and abandoned warehouses filled with hundreds of drums of caustic, flammable and toxic industrial waste. While these environmental problems were not uncommon 30 to 40 years ago, today they are essentially extinct. This is the result of the development of a cradle-to-grave system for managing hazardous waste and Indiana's aggressive compliance, enforcement and permitting programs for all types of waste. Our primary focus has shifted from reacting to the imminent threats common in the past to ensuring the long-term protection of Hoosiers and our environment.

OVERSEEING CLEANUPS

Indiana uses six main programs to ensure the cleanup of contamination. The Emergency Response program addresses contamination from spills that are often completely cleaned up during the initial response. If the contamination cannot be cleaned up through emergency response action, the responsibility is transferred to one of IDEM's other cleanup programs. The most serious contamination often qualifies for the federal Superfund program, where U.S. EPA provides financial and technical assistance to assist IDEM in making sure that the contamination is properly addressed and that any identifiable parties contributing to the contamination pay their share of the cleanup costs.

If the contaminated site does not qualify for federal assistance under Superfund, assistance may be available under IDEM's State Cleanup Program, which is Indiana's version of Superfund (IDEM's State Cleanup Program does not receive federal funding). Indiana also has a Voluntary Remediation Program (VRP) that allows responsible parties to clean up contaminated properties under IDEM supervision. When the contamination is successfully remediated under VRP, the owner may receive a Covenant Not to Sue from the state for the pollutants that were addressed. The management of hazardous waste regulated under the federal Resource Conservation and Recovery Act (RCRA) is overseen by IDEM's RCRA program. Finally, IDEM's Underground Storage Tank (UST) program deals with petroleum contamination from underground storage tanks. Together, these IDEM remediation programs have successfully ensured the cleanup of contamination from thousands of sites in Indiana. More detail on these programs follows.

Emergency Response Program

When spills and releases occur, containment and cleanup is essential to protecting human health and our environment. From traffic accidents involving hazardous cargo or petroleum releases to emergencies at industrial facilities, communities and businesses around the state rely on IDEM's oversight and guidance when emergencies arise. When calls come into the IDEM hotline, highly trained responders work alongside other agencies to help the businesses

and individuals responsible for the incident provide effective environmental protection. Environmental emergencies can be reported to IDEM's 24-hour spill line at (888) 233-7745.

Cleaning up Hazardous Waste at Industrial Sites

Under the federal Government Performance and Results Act, industrial sites that treated, stored or disposed of hazardous waste are actively assessed for soil and ground water contamination.

Since 2005, potential exposure to harmful contaminants has been eliminated or controlled at 58 hazardous waste sites, with ground water contamination being controlled at 55 of these sites.

IDEM will continue coordinating with U.S. EPA to meet goals for effective assessments and ensure necessary measures are taken to protect Hoosiers and our environment.

Helping Businesses Protect Our Environment

Businesses that close due to economic hardship often face the added responsibility of managing large amounts of chemicals and waste materials. IDEM identified and conducted site visits at 75 facilities that were in the process of closing and identified over 190,000 pounds of associated waste that needed to be properly managed. IDEM was often able to help companies transfer their unneeded chemicals to another business that could properly use the material. The sites were identified using the U.S. Department of Labor's Worker Adjustment and Retraining Notification (WARN) system, which provides advance notice of plant closings and mass layoffs.

Many small businesses that store and dispose of hazardous waste may not be aware of the regulations they must comply with, including the need for registration with U.S. EPA. In partnership with the Indiana Manufacturer's Association, IDEM instituted a non-notifier program. Under the initiative, IDEM staff contacted manufacturing facilities that were not registered as "notifiers" with U.S. EPA and provided them with compliance assistance documents, including self-audits and self-certifications.

Indiana Clean Yard Program

Since 2006, IDEM has been concentrating on outreach to auto salvage facilities that must manage automotive fluids, refrigerant and mercury switches. These substances can pose significant environmental impacts if mismanaged or improperly disposed. In the fall of 2009, IDEM launched the Indiana Clean Yard Program, an incentive program to educate and encourage operations to meet their environmental responsibilities and reward those facilities that go above and beyond the requirements of law. To date, 12 facilities have received recognition through the program. Over 47 additional applications have been received by the agency and are currently being reviewed. More information about the Clean Yard Program can be found online at www.idem.IN.gov/4993.htm.

Animal Feeding Operation Programs

There are currently 1,997 animal feeding operations permitted in Indiana and inspected on a routine basis. These include 635 concentrated animal feeding operations (CAFOs) and 1,362 smaller feeding operations called confined feeding operations (CFOs). Indiana's standards for CAFOs are stricter than federal regulations. While the federal regulations for CAFOs do not

contain standards for the construction of manure storage facilities, Indiana has had construction standards and requirements in place since the mid-1970s.

Although not required by U.S. EPA, IDEM also regulates CFOs under a state rule. IDEM's CFO program includes operational requirements for the land application of manure. Information about IDEM's regulatory program for CAFOs and CFOs can be found online at www.idem.IN.gov/4994.htm.

Removal of VX Nerve Agent from the Newport Chemical Depot

In 2007, the entire 1,269-ton stockpile of VX nerve agent that had been stored in Newport, Indiana was safely and completely destroyed. VX is so toxic that a single drop on a person's skin can be fatal. The stockpile had been stored since 1969, when the United States chemical weapons program ended. IDEM's handling of the project has been cited by the U.S. Army as a model for other similar projects.

Clandestine Drug Lab Cleanups

IDEM has developed a program in response to a law passed by the Indiana General Assembly to train and certify contractors and set standards for the cleanup of properties contaminated by illegal drug labs. Currently, 56 contractors have been certified to help property owners, local health departments and communities ensure properties are safe for occupants. For more information, visit www.idem.IN.gov/4184.htm.

Unwanted Medicines

Historical practices have encouraged the disposal of unwanted or expired medicines by flushing them down the toilet or pouring them down a drain. However, wastewater treatment plants and septic systems are not designed to deal with pharmaceutical waste. Medicines pass through the systems and are released into streams, lakes and ground water. Medication traces remaining in surface water may cause adverse effects in fish and other aquatic wildlife, as well as unintentional human exposure to chemicals in the medication. Thrown carelessly in the trash, unwanted medicines pose a risk of accidental poisoning for pets and children and a risk of identity theft for individuals whose personal information is visible on the labels. The best way to reduce the impact of pharmaceutical waste on the environment is to dispose of medicine properly. The good news is that more communities are holding collections to help Hoosiers safely dispose of unwanted medicines. Beginning in 2008, IDEM began partnering with Marsh Pharmacies, the Indiana Poison Center, CLS/Med-Turn and Statewide Medical Services to offer biennial collections at 44 central Indiana Marsh Pharmacy locations. Since then, more than 74,000 prescription bottles have been collected.

IDEM, Indiana's pharmacists, educators, health care providers and waste managers are working in partnership to raise public awareness about the proper disposal of unwanted medicines.

Hoosiers can find more information, including a list of local collection programs and a recycling database, on the Recycle Indiana website www.recycle.IN.gov.

Solid Waste Management Program

Although the number of landfills has decreased since the early 1990s, the average size of each has grown. In 2008, permitted operating solid waste landfills accounted for 5.7 square miles of the state's land area and had a combined capacity of 337 million tons. If disposal rates remain constant, landfill space is predicted to last until 2037.

Local solid waste management districts and communities are working together to offer collection locations and curbside pick-up programs to encourage recycling of paper, plastic, glass, steel and aluminum. Household hazardous waste (HHW) collections are also held in communities throughout the state, which helps the environment by preventing accidental releases of unwanted paints, cleaners, batteries, pesticides, motor oils, used oil filters and unwanted medicines.

Institutional Control Registry

IDEM developed the Risk Integrated System of Closure (RISC) to provide consistency in the closure of cleanup projects. Under RISC, an "institutional control" may be appropriate to prevent public exposure to harmful levels of contaminants at a property by restricting property use or access. The public can find the IDEM Institutional Controls Registry Report, which is a list of sites with institutional controls, on the IDEM website at www.idem.IN.gov/5959.htm.

Contained-In Determination

The 'contained-in' determination is an IDEM policy based upon an EPA policy where IDEM will exempt media (groundwater and/or soil) contaminated with listed hazardous wastes from the hazardous waste regulations and allowing it to be disposed of as a solid waste. More specifically, contaminated media, impacted by listed hazardous wastes and therefore also carrying the same hazardous waste listing, if found to contain levels of the listed constituents meeting IDEM RISC health-based closure levels, is excluded from the hazardous waste regulations. The media cannot exhibit a characteristic of a hazardous waste and the exemption is dependent on the contaminant levels and the potential type a disposal requested. The 'contained-in' approval process has allowed mildly contaminated media to be disposed of in a more cost effective yet still environmentally sound manner. The lower costs associated with disposing of solid wastes rather than hazardous wastes has allowed for minimally contaminated sites to be cleaned up. In many instances, those minimally contaminated sites would otherwise have been left unaddressed and not been cleaned up if the resulting minimally contaminated media had to be addressed and disposed of as a listed hazardous waste. During the past year (2011) the OLQ Compliance and Response Branch received and processed seventy-seven (77) requests for 'contained-in' determination. Those requests resulted in approximately 15854.5 tons of contaminated soil and 251,360 gallons of contaminated groundwater approved for disposal under the 'contained-in' program.

Conclusion

IDEM's Office of Land Quality protects Indiana's soil and ground water by striving to make sure regulated facilities understand and are prepared to meet their environmental responsibilities. Along with educating and providing technical assistance to businesses and communities, IDEM's work to issue permits, conduct inspections, respond to accidental spills and oversee cleanups continues to foster marked improvement in the state's land quality each year.

OFFICE OF WATER QUALITY

Accomplishments:

Improved Water Quality

The Office of Water Quality has worked hard to improve Indiana's water quality. New rules are in place to ensure that Hoosiers drink the highest quality water from their taps. Meanwhile, over 99 percent of the population served by community public water systems receives water that meets all state and federal requirements for drinking water. Initiatives such as the Nonpoint Source Grant program keep hundreds of thousands of pounds of phosphorus, nitrogen and sediment out of Indiana's waterways. Additionally, IDEM's work with combined sewer overflow (CSO) communities will prevent the discharge of billions of gallons of untreated sewage annually, as infrastructure projects are completed. Finally, the reduction of backlogged water quality permits ensures that facilities around the state are operating within current, more stringent water quality standards. While IDEM is still learning more about the state of Indiana lakes and streams, the number of assessments of Hoosier waters is at an all-time high, providing vital information necessary to target projects and water quality improvement. Through grants and increasingly stringent permits, IDEM works with Hoosiers to improve the quality of our water.

Antidegredation Rule Adopted

IDEM has worked to craft a statewide Antidegradation Rule. Antidegradation is a federal requirement that allows new or increased point source discharges to waters under specific circumstances. The IDEM held work group sessions with stakeholders over the past two years to and drafted a rule that increases public opportunities for input, protects swimmable/fishable uses of waters, allows for the issuance of legal permits for discharges to waters, and prohibits violations of water quality standards. On March 14, 2012, the Indiana Water Pollution Control Board finally adopted this statewide rule. The rule is currently at USEPA for review and approval.

Backlog of NPDES Permits Dramatically Reduced

In 2005, IDEM had a backlog of 263 NPDES permits. Some had not been renewed for 20 years and had outdated requirements. Working aggressively, by the end of 2011 OWQ had issued all 263 of the original backlogged permits.

Combined Sewer Overflow Communities

108 communities in Indiana have combined sewer systems that discharge raw sewage into Indiana's waters when it rains. In 2005 only one community had an IDEM-approved long term control plan (LTCP) to address combined sewer discharges, and only 12 had completed the separation of storm and sanitary sewers. The other communities were facing the challenge of meeting federal requirements to dramatically reduce discharges from combined sewers. Over the last seven years, IDEM has worked with communities to commit to making improvements. Communities were initially required to enter into enforceable agreements with IDEM to devise and submit plans that would dramatically reduce discharges. Today, 102 communities have approved plans and are making infrastructure improvements to dramatically reduce discharges during rain storms. Today, thirty-two communities have completed their projects. As a result,

estimates currently indicate that system-wide improvements over the next 20 years will reduce raw sewage discharges by over 30 billion gallons annually.

Improving Watersheds

Over the last year, IDEM completed another 106 total daily maximum loads (TMDLs) on Indiana's streams, bringing the total number to 969 since 2005. TMDLs are reports on streams that aren't meeting water quality standards. TMDLs contain extensive details about the quality of the water within the given watershed and the sources and pollutants that could be contributing to the problems. TMDLs help local communities, businesses, groups and government agencies within a common watershed come together to find and implement solutions for improving their streams and lakes. Where data shows streams have improved and are meeting standards, they can be removed from the state's list of impaired waterways. IDEM is proposing to remove two stream segments in the Bull Run/West Creek watershed in Northwest Indiana from the list of impaired waters.

Blue-green Algae

IDEM continues to coordinate with the Indiana State Department of Health, the Indiana Department of Natural Resources and the Indiana University-Purdue University Indianapolis to monitor lakes, provide notice, and educate the public about harmful algal blooms. IDEM regularly sampled eleven lakes throughout the state and updated the www.algae.IN.gov website with results for blue green algae and toxic bacteria during the summer sampling season. This information raised public awareness about the need to protect pets and family members from exposure to lakes with toxic algal blooms. IDEM and its partner agencies are continuing to get the word out about responsible management of fertilizer containing phosphorus, which can contribute to algal blooms.

Nonpoint Source Program and Total Maximum Daily Loads

Grant programs are another important tool IDEM uses to ensure lakes, rivers and streams meet high water quality standards. Since 2005, IDEM has awarded millions of dollars through two grant programs to fund projects to reduce nonpoint source pollution. Nonpoint source pollution results from land run-off, precipitation, atmospheric deposition, drainage, seepage or hydrologic modification, when water moving across the landscape picks up contaminants such as oil, fertilizer, sediment and other materials. These locally-led projects prevent more than 250,000 tons of sediment, almost 500,000 pounds of phosphorus, and over 800,000 pounds of nitrogen from entering Indiana waters annually, according to modeled estimates. These reductions of pollutants are among the highest reductions in the Midwest. Water quality improvement success stories have been documented in three watersheds, Big Walnut Creek, Pigeon Creek and Lower Clifty Creek.

Grand Calumet River Dredging Project

Located in the northwestern corner of the Hoosier state, the Grand Calumet River stands as a testament to overall improvements in the state's water quality. Industrial development in the Calumet River area began during the 1870s, and by 1890, the west reach of the Grand Calumet River was heavily polluted. Sediment in the Grand Calumet River was contaminated from industrial and municipal discharges long before today's regulations were imposed. These legacy contaminants extend 20 feet deep and continue to restrict industrial, commercial and

recreational uses. Additionally, water quality issues have made it nearly impossible for aquatic life to use the Grand Calumet River as a habitat. In 1987, the International Joint Commission (IJC) listed the Grand Calumet River and Indiana Harbor Ship Canal as an area of concern, or a severely degraded site on the Great Lakes. The IJC is a United States and Canadian-run entity that works to protect shared North American water resources. Two years later, IDEM completed a Phase I Remedial Action Plan to identify the problems in the Areas of Concern, finding that all 14 of the designated beneficial uses for surface water were considered impaired.

In 1998, a group of industries expressed interest in working with Indiana's Natural Resources Trustees to complete a Natural Resource Damage Assessment (NRDA). Eventually, a settlement of \$60 million was reached, with eight industries contributing to the cleanup of legacy contaminants. The settlement was one of the largest NRDA hazardous waste settlements in history.

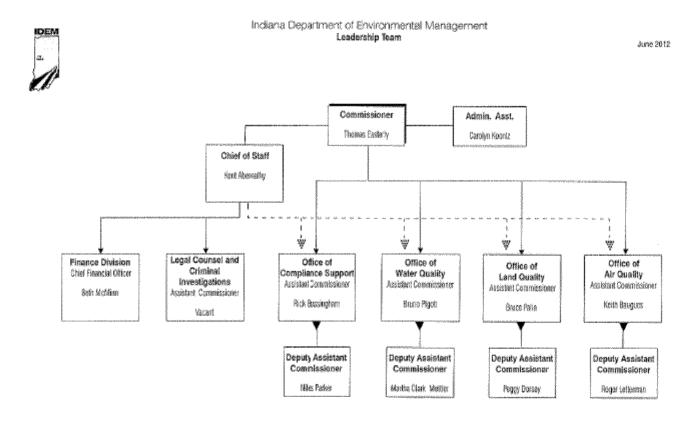
Efforts have been underway for the past several decades to limit or remove sources of pollutants to the Grand Calumet River ecosystem. While point source pollutants have been greatly reduced, the legacy contaminants found in the sediment continue to affect water quality. In 2008, the West Branch Grand Calumet River Sediment Remediation project was announced, and as its goal, the removal of 131,000 cubic yards of sediment from a one mile stretch of the Grand Calumet River. It would be followed by adding a reactive cap which would seal off remaining sediment contaminants. This dredging project was completed in 2011, and a remediation project on 25 acres of the Roxana Marsh was completed in 2012.

IDEM continues to spearhead remediation projects in the Grand Calumet River with the hope that one day the river will be able to support diverse aquatic life. Additionally, construction is scheduled for a project in the DuPont reach of the East Branch Grand Calumet River, which will include over 80 acres of wetlands.

Conclusion

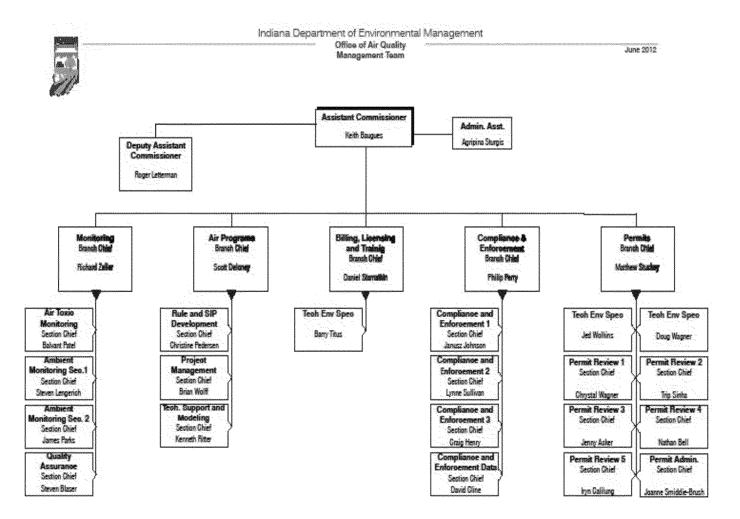
IDEM's Office of Water Quality is working toward the future when all of Indiana's waters will be safe for swimming and fishing, and critical ground water will be suitable for all uses, including drinking. Through continued assessment and adherence to water quality health standards, IDEM is working to further water protection and pollution prevention. Initiatives, such as the nonpoint source grant program, keep millions of pounds of phosphorus, nitrogen and sediment out of Indiana's waterways. IDEM's work with CSO communities will prevent the discharge of billions of gallons of untreated sewage annually as infrastructure projects are completed. Additionally, the reduction of a backlog of water quality permits ensures that facilities around the state are operating within current, more stringent water quality standards.

IDEM Organizational Chart



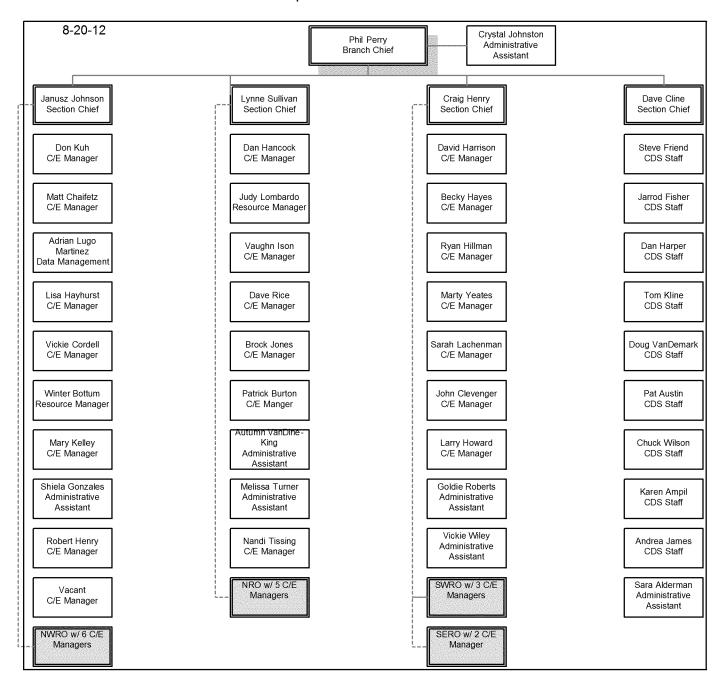
Office of Air Quality

The following organization chart provides the Office of Air Quality management team and the various branches and sections within the office.

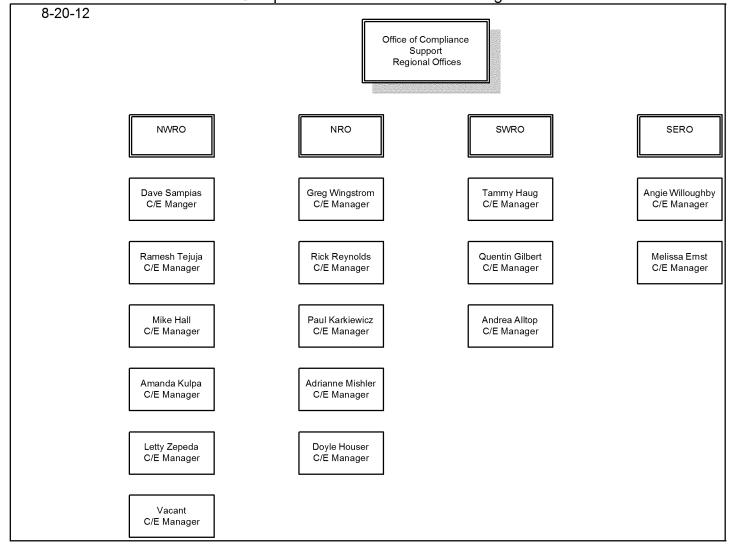


The following staffing charts provide the number of staff within the sections assigned to carry out specific air compliance and enforcement activities. The first chart is for the Air Compliance and Enforcement Branch. The second chart is the regional office staff assigned to the air compliance and enforcement program.

Air Compliance and Enforcement Branch

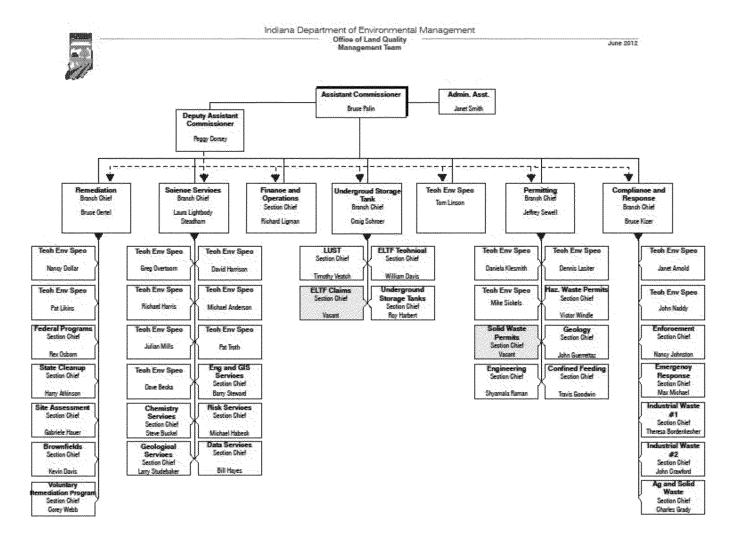


Office of Compliance Support Regional Offices Air Compliance and Enforcement Managers



Office of Land Quality

The following staffing chart provides the number of staff within the sections assigned to carry out specific program management.



			COMPLIANCE & RESPONSE BRANCH				
	Bruce Kizer	John Naddy	Janet Amold	VACANT	Donna Emanuel	Fred Jackson	Nannette Landes
	EBC6 - 10029593	Tech E7 - 10029571	Tech E7 - 10028873	SEM 1 - 10029617	AA3 - 10029706	Sec3 - 10029525	Sec3 - 10029528
							Sharon Herring
							Sec3 - 10029536

Industrial Waste Theresa Bordenkeche SEM S3 - 10029695 Gary Romesser SEM 1 - 10029670 Tracy Barnes SEM 1 - 10029572 George Ritchotte SEM1 - 10029671 Megan Nagle EM2 - 10029672 VACANT EM2 - 10029686 Lori Freeman EM2 - 10029675 Philip Guntle EM2 - 10029573 Alan Minne EM2 - 10029677 Dan Chesterson EM2 - 10029699 Christopher Purvis ES3 - 10029575 Mary Lewis AA5 - 10029588

Haz Waste Compl. John Crawford SEM S3 - 10029680 Roger Wilson SEM 1 - 10029681 Lee Parsons SEM 1 - 10029697 Said Asgari EE1 - 10029696 Bahman Ossivand EE1 - 10029611 Mike Penington EM2 - 10029683 Chris Lowell EM2 - 10029685 Debbie Chesterson EM2 - 10029682 Bob Malone EM2 - 10029684 Theresa Pichtel FM2 - 10029674 Scott Draschill EM2 - 10029574 Kim Whittington EM2 - 10029687

Ag & SW Compliance Charles Grady SEM S3 - 10029599 Randy Jones SEM 1 - 10029601 Jon Ware EM2 - 10029605 Stu Miller EM2 - 10029603 VACANT EM2 - 10029604 Anne Weinkauf EM2 - 10029609 Tim Hotz EM2 - 10029610 Julie Arquette EM2 - 10029614 Joe Williams EM2 - 10028804 Julie Lamberson ES3 - 10029756

Land Enforcement Nancy Johnston SEM S3 - 10028875 VACANT SEM1 - 10028877 Christina Halloran SEM1 - 10028886 Brenda Lepter SEM1 - 10028883 Sherri Bass SEM1 - 10028881 Tom Newcomb SEM1 - 10028901 Jennifer Reno SEM1 - 10028901 Chiki Okeke EM2 - 10028884 ldelia Walker-Glover EM2 - 10028880 Donna Bates AA5 - 10028908

Emergency Resp. Max Michael SEM S3 - 10029709 Mike Sutton SEM 1 - 10029713 Brian Smith SEM 1 - 10029711 Dave Daugherty SEM1 - 10029714 David Cage SEM1 - 10029716 Bill Myers SEM1 - 10029717 Greg Carter SEM1 - 10029715 Pat Colcord SEM1 - 10029720 Lavern Beauchamp ES3 - 10029721 Randy Jurgens ElecTech1 - 10029846

Industrial Waste
N - Vacant - EM2 - 10029798
N - John Howard - SEM1 - 10028814
NW - Scott Omsby - SEM1 - 10028792

Ag & SW

N - Steve Schafer - EM2 - 10028815 NW - Cheryl Satkus - EM2 - 10028789 SW - VACANT - EM2 - 10029547 SW - Kaye Driskill - EM2 - 10029602 SE - Mark McCory - EM2 - 10029608

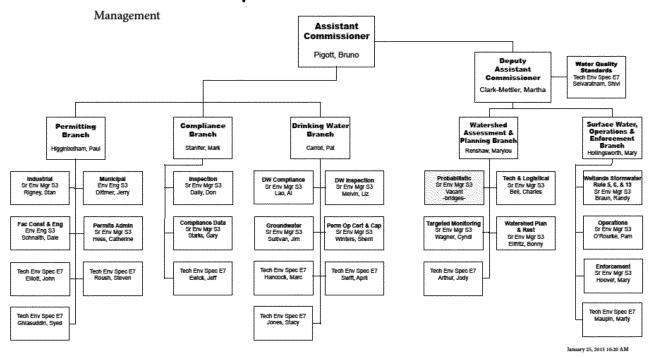
		164-0-0	
Industrial Waste	Emergency Response	LUST	
VACANT - NRO	Richard Hackel - NRO	Rick Massoels - NWRO	
John Howard - NRO	David Greinke - NWRO	Cliff Rice - SERO	
Scott Ormsby - NWRO	Andy Stinchfield - SWRO		
Ag & SW	UST		
Steve Schafer - NRO	VACANT - NRO		
Cheryl Satkus - NWRO	Bob Strimbu - NWRO		
VACANT - SWRO	Matt Hills - SWRO		
Kaye Driskill - SWRO			

IDEM Office of Water Quality

The Office of Water Quality's (OWQ) mission is to monitor, protect, and improve Indiana's water quality to ensure its continued use as a drinking water source, habitat for wildlife, recreational resource and economic asset.

The office achieves this by: developing rules, guidance, policies and procedures; assessing surface and ground water quality; regulating and monitoring drinking water supplies and waste water facilities; protecting watersheds and wetlands and providing outreach and assistance to the regulated community and the public while supporting environmentally-responsible economic development.

Office of Water Quality



Office of Water Quality

Compliance Branch January 11, 2013 10:43 AM

Tech Env Spec E7 10029459 Ewick, Jeff 2830-100660 Env Mgr 2 10029300 Monigle, Rebe 2830-100600 Program Coor 3 10029444 Compliance Data Sr Env Mgr S3 10029369 Starts, Gary 2830-180600 Inspection Sr Env Mgr S3 10029384 Daily, Don 2630-100600 Sr Env Mgr 10029400 McDanlel, Rose 2830-100600 In-Rind Perm & Ent Sr Env Mgr 10029323 Grams, Pam 2830-100600 Sr Env Mgr 10029298 Maupin, Natali 2830-100600 Sr Env Mgr 10029390 Sr Env Mgr 10029381 Sr Env Mgr V10029387 Env Sci 3 10029427 Knowles, Dan 2830-100600 In-Kind Perm & End Env Sci 3 10029413 Bye, Julie 2830-100600 In-Kind Perm & Enf Sr Env Mgr 10026855 Raisox, Lynn Air 2830-190600 Env Mgr 2 10029417 Demmings, Hele 2830-100600 Env Mgr 2 10029382 Numnery, Missy 2830-100600 Secretary 3 10028857 Means, Ronnella 2830-100600 an-rand Perm & Enf Admy Asi 4 10026920 Matthews, Anita 2830-100600 in-Kind Perm & Em Env Mgr 2 10029119 Palin, Jason 2830-100600 Env Mgr 2 10029391 Deeter, Aaron 2830-100600 Env Sci Owens, Conaid SEEP

Env Eng 1 10029283 Hourmozdi, Sholeh 2830-100600	Sr Env Mgr 10029284 Hamblin, Richard 2830-100600	Sr Env Mgr 10029416 House, Jason 2830-100600 In-Kind PPG/GW	Sr Env Mgr 10029392 Timble, Tods 2630-100600 to-find PPG/GW	Env Eng 1 10029331 Paritshat, Dhamend 2830-100608	Env Eng 1 10029332 Fiorczyk, Mathew 2830-100600	Sr Env Mgr 10029293 Voss, Leigh 2830-100500	Env Mgr 2 10029288 Jordan, Sheri 2830-100600	Env Mgr 2 10029460 Gwfnn, Joe 2630-100600
Sr Env Mgr 10029322 Zurcher, Holly 2830-100600	Sr Env Mgr 10029285 Beumer, Alson 2830-100600	Sr Env Mgr 10029510 Stenner, William 2830-100600 In-Kind PPG/SW	Sr Env Mgr 10029299 Tennis, Davie 2630-100600 In-rand PPavsw	Sr Env Mgr 10029327 Worley, James 2830-100600	Env Eng 2 10029319 Soliven, Levy 2830-100600	Admy Ast 3 10029192 Carter, Charnel 2830-100600	Admy Ast 5 10029297 Clinton, Sharon 2830-100600	Secretary 3 10029271 Ney, Darrita 2630-100600
Sr Env Mgr 10029501 Kesterson, Nahir 2633-16700 2830-160600	Sr Env Mgr 10029335 Gardner, Nicole 2810-144405 2830-100600	Sr Env Mgr 10023232 Donnellan, John 2830-100600 In-rond PPGrGW	Env Mgr 2 10029295 Cook, Matthew 2830-100600 b-line PPU/SW	Env Eng 1 10029328 Czemiakowski, Kevin 2830-100600	Env Eng 3 10029398 Miles, Mike 2630-100600	Secretary 3 10025270 Watkins, Valentina 2830-100600	Secretary 3 1022/272 Malone, Ramona 369-14400 2830-100600	
Env Mgr 2 10029435 Ritchie, Miranda 2830-100600	Env Eng 2 10029312 Sondhe, Gurseo 2830-100600	Env. Mgr 2 10029815 Wendholf, Kara 2830-100600 In-Kind PPG/GW	Env Mgr 2 10029374 Fellen, Allssa 2830-100680 In-Kind PPG/GW					
Env Mgr 2 10029457 Carlino, Jennifer 2830-100600			Env Eng 3 10029314 De, Asit K. 2530-100500 In-flood PPS/GW					

Office of Water Quality

Surface Water, Operations, and Enforcement Branch January 25, 2013 10:36 AM

Wellands Stomwaser Rule 5, 6, 8, 13 St Erw Mgr S3 10029421 Brown, Randy 3816-341400

Sr Env Mgr 10029315 Korthals, Reggle 2630-100600 Blomwater

> Erry Mgr 2 10029296 Vacant 2000-10000 Stermenter -heli

Sr Env Mgr 10029429 Randolph, Jason 3610-141400 40189007

Env Mgr 2 10029397 Parsons, Heathe 3610-141400 401

Env Mgr 2 10029423 Smedley, Matt 3610-141400 401

Env Mgr 2 10028891 Book, Sue 3615-141406

Env Mgr 2 10029305

10029300 Groce, Samantha 3610-141400 401

Env Mgr 2 10058454 Schmid, Ericka 2830-100600 Rule 5

Env Mgr 2 10029410 McAkahan, Aaron 2006-100800 401 414

> Env Mgr 2 10029290 Jay Turner 3610-141400 401

Env Mgr 2 10058456 Beck, Rob 2830-10060 Stranger 3810-141400

Admiv Ast 5 10029452 Kindrick, Karta 3610-141400 Env Broch C E6 10029394 Hollingsworth, Mary 3610-141400

Tech Env Spec E7 10029428 Maupin, Marty 3610-141400

7169 Operations Sr Env Mgr S3 10029415 O'Rourke, Part 2830-100600

Sr Env Mgr 10029484 Newton, Lynne 3610-141400

Sr Env Mgr 10029441 Myers, Lance 3610-141490 319

Env Mgr 2 10029401 Glover, Deb 283G-101700

Admy Ast 5 10029307 Palmer, Donna 2830-100600 Sr Env Mgr 10029370 Duff, David 3610-141400 319

Sr Env Mgr 10029494 Roberts, Jane (9870-140400) 414

Program Dir 2 10029443 Coker, Nancy 2830-100500

Secretary 3 10029274 Ketner, Dothier 2630-100600 197102

Enforcement Sr Env Mgr S3 10028874 Hoover, Mary 3610-141400

Sr Env Mgr 10028905 Cluxton, Paul 3610-141400 Sr Env Mgr 10029455 Ressier, Terry 3610-141400

Env Mgr 2 10028893 Judson, Edward 2830-101700

> Env Mgr 2 10026889 Knax, David

Env Mgr 2 10028894 Lenahan, Aletha 3610-141400

Env Mgr 2 10028892 McGlinchey, Scott 3610-141400

Admiv Ast 4 10028676 Wheat, Rose 3610-141400

Appendix F: SRF Correspondence



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION5 77 WEST JACKSON BOULEVARD CHICAGO, IL 60604-3590

JUN 29 2012

REPLY TO THE ATTENTION OF:

Thomas Easterly Commissioner Indiana Department of Environmental Management 100 North Senate Avenue Mail Code 50-01 Indianapolis, Indiana 46204-2251

Dear Mr. Easterly:

Through this letter, the U.S. Environmental Protection Agency is initiating a review of the Indiana Department of Environmental Management's (IDEM) Resource Conservation and Recovery Act Subtitle C, Clean Water Act National Pollutant Discharge Elimination System and Clean Air Act Stationary Source enforcement programs. We plan to review IDEM's inspection and enforcement activity from Federal Fiscal Year (FY) 2011.

As you may know, in FY 2007, the EPA regions completed the first round of reviews using the State Review Framework (SRF) protocol. This work created a baseline of performance from which future oversight of state compliance and enforcement programs can be tracked and managed. In early FY 2008, EPA evaluated the first round of reviews and a work group composed of EPA headquarters, regional managers and staff, ECOS, state media associations and other state representatives revised the SRF elements, metrics, process and guidance.

Round 2 of the SRF is a continuation of this national effort that allows Region 5 to ensure that IDEM meets agreed upon minimum performance levels in providing environmental and public health protection. We intend to assist IDEM in meeting federal standards and goals agreed to in IDEM's Performance Partnership Agreement.

EPA will contact IDEM enforcement managers and staff to schedule a meeting to discuss expectations, procedures and a time line for the review. EPA will send its analysis of the SRF data metrics and a list of selected facility files at a later date. Other documents used to evaluate the state's programs can be found on EPA's Online Tracking Information System (OTIS) website at http://www.epaotis.gov/otis/srf.

We look forward to working with you on this project. If you have any questions, please contact me at (312) 886-3000 or Alan Walts, Director, Office of Enforcement and Compliance Assurance, at (312) 353-8894 or walts.alan@epa.gov.

Sincerely.

Bharat Mathur

Deputy Regional Administrator

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IDEM SRF DMA, File Selection and Background Information Stanbania Change to: MSTANIFE, BKIZER, PPERRY,

Stephanie Cheaney to: MSTANIF bpigott

08/02/2012 09:39 PM

jereza.lorna, brown.todd, bahr.ryan, gunter.kenneth, Cc: coleman.james, balasa.kate, Dee.rhiannon, flowers.debra, frank.nathan, wilson.jennifera, heger.michelle,

Mark, Phil, Bruce, and Bruno,

Thank you for meeting with us on Tuesday.

Here are the File Selection and Data Metric Analysis spreadsheets for IDEM 's Round 2 SRF.





IDEM File Selection.xlsx IDEM DMA.xlsx

In addition, the below is an excerpt from the SRF Report Template for State Background information. Please provide the following information for IDEM by September 29, 2012.

Agency Structure

[How the agency is structured, including whether it is divided into regions, districts, or other units.]

Compliance and Enforcement Program Structure

[How the Compliance and Enforcement program is structured, including whether it is centralized or separated by media program.]

Roles and Responsibilities

[Who does what? Are other state or local organizations (such as other state agencies, state attorney general, or local governments) involved in the compliance and enforcement program? How do these organizations coordinate these roles and responsibilities?]

Local Agencies Included and Excluded From Review

[If program responsibilities are assumed by local agencies, which agencies are included and excluded in the review, and which local agencies are being reviewed separately? Please explain based on the criteria in the Local Agency Guidance.]

Resources

	[Provide the amount of FTE available for air, water, and hazardous waste respectively.
	If available, provide the number of inspectors, attorneys, etc., employed to implement the state's compliance monitoring and enforcement program.
	If significant, include the number of contractors and other personnel who are employed to supplement the program.
TANKAN OF THE STATE OF THE STAT	If the state has regional offices responsible for different geographic areas, please provide a breakout of the FTE distribution by regional office.
	Discuss any resource constraints that present major obstacles to implementation.]
Staff	ng and Training
	[Indicate if the program is fully staffed or whether the program has been impacted by vacancies, or is expecting to be impacted in the near future.
	Describe the state program for hiring and retaining qualified staff.]

Data Reporting Systems and Architecture

[Discuss how the state program reports minimum data requirements (MDRs) to the EPA national data systems. If applicable, describe the state's own data system and how the architecture and data reporting requirements of the state system impact the ability to report the MDRs to EPA.]

Major State Priorities and Accomplishments

[Directions for completing this section:

- 1. This is an opportunity to recognize state program elements that EPA feels are exemplary.
- 2. EPA should give the state the opportunity to provide information for this section. If state-provided information is included, EPA should insert language that indicates that it did not independently verify that information.
- 3. EPA may also choose to develop this section in conjunction with the state.
- 4. If the state does not provide any information for this section, it can be excluded.]

Priorities: [Include a brief summary of compliance and enforcement priorities provided by the state, and how they were established (e.g., legislature, EPA national priorities, tips/complaints).]

Accomplishments: [Highlight major accomplishments achieved through compliance monitoring, compliance assistance/outreach, pollution prevention, voluntary programs, and enforcement. These are accomplishments that exceed national policy/guidance minimum requirements. Outcome information is welcome.]

If you have any questions, please feel free to contact me or any of the media staff.

Thank you,

Stephanie L. Cheaney
State Review Framework Coordinator and Analyst
Environmental Protection Agency - Region 5
Office of Enforcement and Compliance Assurance Phone: 312-886-3509 cheaney.stephanie@epa.gov



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGIONAL ADMINISTRATOR REGION 5 77 WEST JACKSON BOULEVARD CHICAGO, IL 60604-3590

FEB 1 9 2013

Thomas Easterly
Commissioner
Indiana Department of Environmental Management
100 North Senate Avenue
Mail Code 50-01
Indianapolis, Indiana 46204-2251

Dear Mr. Easterly:

As you know, the U.S. Environmental Protection Agency worked with the Indiana Department of Environmental Management to review IDEM's Clean Air Act Stationary Source, Clean Water Act National Pollutant Discharge Elimination System, and Resource Conservation and Recovery Act Subtitle C hazardous waste enforcement programs.

Enclosed for IDEM's review is a draft Enforcement Review Report that lists our detailed findings. Please send IDEM's response to Alan Walts, Director of Region 5's Office of Enforcement and Compliance Assurance, by March 18, 2013. We will then prepare a final report that incorporates IDEM's comments.

We appreciate IDEM's cooperation in this effort. If you have any questions or issues, feel free to contact me at 312-886-3000, or your staff may contact Alan Walts at 312-353-8894 or walts.alan@epa.gov.

Sincerely,

Bharat Mathur

Deputy Regional Administrator

Enclosures